

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001542

FILED  
Jun 12, 2009  
Secretary of State

Entity Name: FLORIDA MINERALS ASSOCIATION SCHOLARSHIP FOUNDATION, INC.

**Current Principal Place of Business:**

1101 N. MADISON ST.  
QUINCY, FL 32351

**New Principal Place of Business:**

**Current Mailing Address:**

1101 N. MADISON ST.  
QUINCY, FL 32351

**New Mailing Address:**

FEI Number: 59-3714893      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MIHALIK, DAVID P  
6359 SAN MARTIN CT.  
TALLAHASSEE, FL 32312      US

**Name and Address of New Registered Agent:**

MIHALIK, DAVID P  
1101 NORTH MADISON ST  
QUINCY, FL 32351      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID P MIHALIK

06/12/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DS      ( ) Delete  
Name: NIX, SHERRI  
Address: 1101 N. MADISON ST  
City-St-Zip: QUINCY, FL 32351

Title: DV      ( ) Delete  
Name: WILLIAMS, CHAD  
Address: 2916 E PARK AVE  
City-St-Zip: TALLAHASSEE, FL 34301

Title: DT      ( ) Delete  
Name: BATTS, MIKE  
Address: 2916 E PARK AVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DP      ( ) Delete  
Name: MIHALIK, DAVID  
Address: 1101 N MADISON ST  
City-St-Zip: QUINCY, FL 32351

Title: DS      ( ) Delete  
Name: GONG, STEVEN W  
Address: 800 FAIRWAY DR, STE 3540  
City-St-Zip: DEERFIELD BEACH, FL 33441

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MIHALIK

DP

06/12/2009

Electronic Signature of Signing Officer or Director

Date