2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000408

FILED Apr 29, 2008 Secretary of State

Entity Name: PENNY DUTEAU SCHOLARSHIP FUND, INC.

Current Principal Place of Business: New Principal Place of Business: 916 US HIGHWAY 41 SOUTH INVERNESS, FL 34450 **Current Mailing Address: New Mailing Address:** 916 US HIGHWAY 41 SOUTH INVERNESS, FL 34450 FEI Number: 61-1412563 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUTEAU, MARIA R 916 US HIGHWAY 41 SOUTH INVERNESS, FL 34450 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DUTEAU, MARIA R Name: Name: Address: 109 HUNTING LODGE DRIVE Address: City-St-Zip: INVERNESS, FL 34453 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LOPER, SUSAN Name: Address: 2254 COACHMAN ROAD Address: City-St-Zip: SPRINGHILL, FL 34608 City-St-Zip: Title: () Delete Title: () Change () Addition WHITE, MERCEDIA Name: Name: 8571 E HENDERSON TRAIL Address: Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DEAN, CHARLES S Name: 285 S NESBIT TERRACE Address: Address: City-St-Zip: INVERNESS, FL 34450 City-St-Zip: Title: Title: () Delete () Change () Addition DUTEAU, JOLYNN Name: Name: 4926 STOLLS AVENUE Address: Address: City-St-Zip: TAMPA, FL 33615 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: MARIA R DUTEAU D 04/29/2008