

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001138

FILED
Apr 22, 2004
Secretary of State**Entity Name:** DESOTO SCHOLARSHIP FUND, INC.**Current Principal Place of Business:**10801 DESOTO RD.
RIVERVIEW, FL 33569**New Principal Place of Business:****Current Mailing Address:**P. O. BOX 216
RIVERVIEW, FL 33568**New Mailing Address:**318 FAIRSIDE CT
SUN CITY CENTER, FL 33573**FEI Number:** 43-1956706**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FISHBACK, WALTER W
318 FAIRSIDE CT.
SUN CITY CENTER, FL 33573 US**Name and Address of New Registered Agent:**

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:****Title:** P () Delete
Name: WATSON, DAVID G JR
Address: 754 FORTUNA DR
City-St-Zip: BRANDON, FL 33511**Title:** D () Delete
Name: FRANKLIN, SKIP
Address: 3402 CLARISSA AVE
City-St-Zip: RUSKIN, FL 33570**Title:** D () Delete
Name: LOWE, FRANK
Address: PO BOX 214
City-St-Zip: BRANDON, FL 33509**Title:** D () Delete
Name: ELLIS, WALTER
Address: PO BOX 216
City-St-Zip: BRANDON, FL 33588**Title:** S () Delete
Name: FISHBACK, WALT
Address: 318 FAIRSIDE CT
City-St-Zip: SUN CITY CENTER, FL 33573**Title:** T () Delete
Name: AUERBACH, BERNI
Address: 1020 BLUEWATER DR
City-St-Zip: SUN CITY CENTER, FL 33573**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: WATSON, DAVID G SR
Address: 1061 EMERALD DR.
City-St-Zip: BRANDON, FL 33511**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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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 for the exemption stated in Section 119.07(3)(i), 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: WALTER W FISHBACK

SEC'

04/22/2004

Electronic Signature of Signing Officer or Director_____
Date