

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002364

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** MICHAEL TROJNAR SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

13042 ROCKY RIVER RD N  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

13042 ROCKY RIVER RD N  
JACKSONVILLE, FL 32224

**New Mailing Address:**

**FEI Number:** 01-0652846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAVRICA, BRENDON M  
13042 ROCKY RIVER RD N  
JACKSONVILLE, FL 32224 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:** VD  
**Name:** LYNCH, NICOLE  
**Address:** 736 S HERITAGE CREEK WAY  
**City-St-Zip:** ST. AUGUSTINE, FL 32084

**Title:** VD  
**Name:** STROUGH, DOUGLAS  
**Address:** 13882 HANOVER PARK CT.  
**City-St-Zip:** JACKSONVILLE, FL 32224

**Title:** D  
**Name:** VAVRICA, BRENDON  
**Address:** 13042 ROCKY RIVER RD N  
**City-St-Zip:** JACKSONVILLE, FL 32224

I hereby 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 all other like empowered.

**SIGNATURE:** BRENDON VAVRICA

DIR

04/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date