

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90349 010 ****61.25

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04072006 Chg-NP CR2E037 (11/05)

DOCUMENT # N02000002966					
1. Entity Name THE GOODRUM/DARBY SCHOLARSHIP FOUNDATION, INC.					
Principal Place of Business 305 AVENUE X N.E. WINTER HAVEN, FL 33880 US			Mailing Address P. O. BOX 4462 WINTER HAVEN, FL 33805 US		
2. Principal Place of Business 175 Prairie Dune Way Suite, Apt. #, etc. Orlando, FL City & State		3. Mailing Address Suite, Apt. #, etc. City & State		4. FEI Number 02-0582860	
Zip 32828		Country USA		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HORTON, NORRIS H II 175 PRAIRIE DUNE WAY ORLANDO, FL 32828			7. Name and Address of New Registered Agent Name: Street Address (P.O. Box Number is Not Acceptable): City: FL Zip Code:		
8. 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. I am familiar with, and accept, the obligations of registered agent. SIGNATURE: <u>Norris H. Horton</u> 4/1/06 Signature, typed or printed name of registered agent and title if applicable. (Check: Registered Agent signature required if status is changing.)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution: ☐		\$5.00 May Be Added to Fees Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DARBY, DAVID 8041 ARCHER CIR TALLAHASSEE, FL 32309	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT/CHAIRMAN BOARD OF Directors NORRIS H. HORTON 175 Prairie Dune Way, Orlando, FL 32828	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HILLIARD, CHARLIE P O BOX 1324 WINTER HAVEN, FL 33880	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALHOUN, LEANDER 1757 2 STREET NE WINTER HAVEN, FL 33881	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THOMPSON, GERRI 603 AVE O NE WINTER HAVEN, FL 33805	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COVINGTON, JOHN 10991 VALLEY FORGE CIR CARAVEL, IN 43036	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, TIMOTHY 305 AVE X NE WINTER HAVEN, FL 33880	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Norris H. Horton</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4/1/06 401-381-3691 Date Daytime Phone #		