2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2008
Secretary of State

DOCUMENT# N02000003557

Entity Name: ST. ANDREW SCOTTISH SOCIETY SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

940 S. DORAL LANE
VENICE, FL 34293

New Principal Place of Business:

4532 DEER TRAIL BLVD.
SARASOTA, FL 34238

Current Mailing Address:

PO BOX 2592
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 04-3666660 **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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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:	STUART, ANTHONY	
Address:	940 S DORAL LANE	
City-St-Zip:	VENICE, FL 34293	
Title:	VP	( ) Delete
Name:	MARTIN, JAMES	
Address:	4532 DEER TRAIL BLVD	
City-St-Zip:	SARASOTA, FL 34238	
Title:	S	( ) Delete
Name:	ROACH, SHARON	
Address:	816 PINEAPPLE AVENUE	
City-St-Zip:	NOKOMIS, FL 34275	
Title:	T	( ) Delete
Name:	DAVID, CAROLINE	
Address:	5650 CORTINA LANE	
City-St-Zip:	PALMETTO, FL 34221	
Title:	T	( ) Delete
Name:	CRAIG, CHARLES	
Address:	5650 CORTINA LN	
City-St-Zip:	PALMETTO, FL 34221	
Title:	T	( ) Delete
Name:	KEMP, RONALD	
Address:	4312 PRO AM AVE EAST	
City-St-Zip:	BRADENTON, FL 34203	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PRES	(X) Change ( ) Addition
Name:	MARTIN, JAMES N	
Address:	4532 DEER TRAIL BLVD.	
City-St-Zip:	SARASOTA, FL 34238	
Title:	VP	(X) Change ( ) Addition
Name:	MACMILLAN, DAVID	
Address:	534 LUMINARY BLVD.	
City-St-Zip:	SARASOTA, FL 34229	
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: JAMES N. MARTIN PRES 07/23/2008

Electronic Signature of Signing Officer or Director — Date