2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006455

Entity Name: BOY SCOUT TROOP 544, INC.

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1825 W. FRENCH AVENUE ORANGE CITY, FL 32763 US

Current Mailing Address: New Mailing Address:

P.O. BOX 740789

ORANGE CITY, FL 32774 US

FEI Number: 41-2055557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MCCRAY, ROBERT B 1825 W. FRENCH AVE ORANGE CITY, FL 32763 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MCCRAY, PAUL S BARANET, NICHOLAS Name: Name: 1815 W FRENCH AV. Address: 68 ELMWOOD TR. Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: DELAND, FL 32724

Title: VD () Delete Title: (X) Change () Addition

MCCRAY, ROBERT B Name: MCCRAY, ROBERT B Name: Address: 1825 W. FRENCH AVENUE Address: 1825 W. FRENCH AVENUE City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: ORANGE CITY, FL 32763

Title: STD () Delete Title: () Change () Addition

WAPLES, RALPH R Name: Name: 3990 AIRPORT RD Address: Address: City-St-Zip: DELAND, FL 32724 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition

Name: VOUGH, JAMES R Name: VOUGH, JAMES R 1021 HANCOCK AVENUE Address: Address: 2527 SCOTTVILLE AVE City-St-Zip: DELTONA, FL 32728 City-St-Zip: DELTONA, FL 32725

Title: () Delete Title: () Change () Addition

COCKAYNE, MUNSON Name: Name: 1480 RACINE RD Address: Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MILLHOLEN, GERALD MILLHOLEN, GERALD Name: Name: Address: 811 W EUCLID AVE Address: 811 W EUCLID AVE DELAND, FL 32720 DELAND, FL 32720 City-St-Zip: 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: ROBERT B MCCRAY D 04/14/2008