

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007345

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** TARPON REUNION COMMITTEE SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

2936 PEACE RIVER DRIVE  
PUNTA GORDA, FL 33983

**New Principal Place of Business:**

**Current Mailing Address:**

215 WEST OLYMPIA AVENUE  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 20-4447547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYMANS, MICHAEL P  
MICHAEL P HAYMANS ATTORNEY AT LAW, P. A.  
215 WEST OLYMPIA AVENUE  
PUNTA GORDA, FL 33950 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: DP  
Name: DE GAETA, PAUL  
Address: 2936 PEACE RIVER DRIVE  
City-St-Zip: PUNTA GORDA, FL 33983

Title: V  
Name: CHRISTENSEN, MARK  
Address: 2936 PEACE RIVER DRIVE  
City-St-Zip: PUNTA GORDA, FL 33983

Title: DS  
Name: HAYMANS, MICHAEL  
Address: 215 WEST OLYMPIA AVENUE  
City-St-Zip: PUNTA GORDA, FL 33950

Title: DT  
Name: ETHRIDGE, GAIL  
Address: 17505 SENATOR DRIVE  
City-St-Zip: PUNTA GORDA, FL 339552323

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: PAUL DEGAETA

DP

05/01/2012

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

\_\_\_\_\_  
Date