2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009306

FILED May 05, 2009 Secretary of State

Entity Name: BOB MCCORD SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1010 KENNEDY DR 1010 KENNEDY DR KEY WEST, FL 33040 SUITE 100

KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

155 HIGH RIDGE RD WAYNESVILLE, NC 28786

FEI Number: 22-3889014 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: Name and Address of New Registered Agent:

BITTNER, DALE BITTNER, DALE 1010 KENNEDY DR 1010 KENNEDY DR US

KEY WEST, FL 33040 SUITE100 KEY WEST, FL 33040 US

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: DALE BITTNER 05/05/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MCCORD, WILLIAM L MCCORD, WILLIAM L Name: Name: Address: 1010 KENNEDY DR Address: 1010 KENNEDY DR, SUITE 100

City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

(X) Change () Addition Title: () Delete Title: Name: MCCORD, LYNN Name: MCCORD, LYNN

Address: 1010 KENNEDY DR Address: 1010 KENNEDY DR. SUITE 100 City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: () Delete Title: (X) Change () Addition BITTNER, DALE Name: BITTNER, DALE Name:

1010 KENNEDY DR 1010 KENNEDY DR, SUITE 100 Address: Address:

City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

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: DALE BITTNER D 05/05/2009