

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002981

FILED
Aug 28, 2008
Secretary of State

Entity Name: FBMGA SCHOLARSHIP TRUST, INC.

Current Principal Place of Business:

BILL MELTON ROAD
C/O FERNANDINA BEACH GOLF COURSE
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15147
FERNANDINA BEACH, FL 320353103

New Mailing Address:

FEI Number: 35-2203560 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:

POOLE, WESLEY R
303 CENTRE STREET STE 200
FERNANDINA BEACH, FL 32034 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FINOCCHIO, FRANK S
Address: 5341 FLORENCE PT DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: WYLIE, RODERICK W
Address: 86265 AUGUSTUS AVE
City-St-Zip: YULEE, FL 32097

Title: D () Delete
Name: GIBSON, JAMES
Address: 95038 PANDYS PLACE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: EDWARDS, JAMES
Address: 3150 S FLETCHER AVE
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RODERICK W. WYLIE

TREA

08/28/2008

Electronic Signature of Signing Officer or Director

Date