

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004481

FILED
Jun 15, 2007
Secretary of State

Entity Name: THE MORGAN ROSE SCOTT MEMORIAL SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

19448 WEST INDIES LANE
JUPITER, FL 33469

New Principal Place of Business:

19448 WEST INDIES LANE
TEQUETSA, FL 33469

Current Mailing Address:

19448 WEST INDIES LANE
JUPITER, FL 33469

New Mailing Address:

19448 WEST INDIES LANE
TEQUESTA, FL 33469

FEI Number: 20-0446545 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:

SCOTT, SHARON R
19448 WEST INDIES LANE
TEQUESTA, FL 33463 US

Name and Address of New Registered Agent:

SCOTT, SHARON R
19448 WEST INDIES LANE
TEQUESTA, FL 33469 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: _____

06/15/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCOTT, SHARON
Address: 19448 WEST INDIES LANE
City-St-Zip: JUPITER, FL 33469

Title: VD () Delete
Name: SCOTT, JAY
Address: 19448 WEST INDIES LANE
City-St-Zip: JUPITER, FL 33469

Title: STD () Delete
Name: DERK, LINDA
Address: 8649 ROSALIE COURT
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCOTT, SHARON
Address: 19448 WEST INDIES LANE
City-St-Zip: TEQUESTA, FL 33469

Title: VD (X) Change () Addition
Name: SCOTT, JAY
Address: 19448 WEST INDIES LANE
City-St-Zip: TEQUESTA, FL 33469

Title: STD (X) Change () Addition
Name: SCOTT, SHARON
Address: 19448 WEST INDIES LANE
City-St-Zip: TEQUESTA, FL 33469

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: SHARON SCOTT

PD

06/15/2007

Electronic Signature of Signing Officer or Director

Date