


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000000450
 1. Entity Name
 MARGARET POLLARA CARDILLO CULTURAL
 ENHANCEMENT SCHOLARSHIP FUND, INC.



Principal Place of Business Mailing Address
 3550 EAST TAMiami TR. 3550 EAST TAMiami TR.
 NAPLES, FL 34112 NAPLES, FL 34112

DO NOT WRITE IN THIS SPACE



01112007 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-1056933	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CARDILLO, JOHN P
 3550 EAST TAMiami TR.
 NAPLES, FL 34112

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SMULEWITZ, GRACEMARY C 245 RIVERVIEW AVENUE HIGHLAND PARK, NJ 08904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CARDILLO, MARK J 101 SHERBROOK DR. BERKELEY HEIGHTS, NJ 07922
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARDILLO, JOHN P 3550 EAST TAMiami TR. NAPLES, FL 34112
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 01/22/07-80023-014 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John P. Cardillo* 1-16-07 239-774-2229
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #