

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006261

FILED
Feb 22, 2005
Secretary of State

Entity Name: LAURELYN LACAYO MEMORIAL SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

8228 MANOR ROAD
ELKINS PARK, PA 19027

New Principal Place of Business:

201 S. 25TH STREET
805
PHILADELPHIA, PA 19103

Current Mailing Address:

8228 MANOR ROAD
ELKINS PARK, PA 19027

New Mailing Address:

201 S. 25TH STREET
805
PHILADELPHIA, PA 19103

FEI Number: 20-1287365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBINGER, JEFFREY
3111 STIRLING ROAD
FORT LAUDERDALE, FL 33312 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: D () Delete
Name: STEWART, DAVID
Address: 8228 MANOR ROAD
City-St-Zip: ELKINS PARK, PA 19027

Title: D () Delete
Name: STEWART, LISA
Address: 8228 MANOR ROAD
City-St-Zip: ELKINS PARK, PA 19027

Title: D (X) Delete
Name: RUBINGER, JEFFREY
Address: 3111 STIRLING ROAD
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STEWART, DAVID
Address: 201 S. 25TH STREET, APT. 805
City-St-Zip: PHILADELPHIA, PA 19103

Title: D (X) Change () Addition
Name: RUBINGER, JEFFREY
Address: 3111 STIRLING ROAD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID STEWART

D

02/22/2005

Electronic Signature of Signing Officer or Director

Date