2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 09, 2006
Secretary of State

DOCUMENT# N04000007909

Entity Name: O.C. FRAZIER SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

600 N. RIO GRANDE AVENUE
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

600 N. RIO GRANDE AVENUE
NORTH MIAMI BEACH, FL 32805 US

New Mailing Address:

65 NE 168TH STREET
NORTH MIAMI BEACH, FL 33162-340 US

FEI Number: 20-1682916 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, GLENN R ESQ.
67 N.E. 168TH STREET
NORTH MIAMI BEACH, FL 33162 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:	CEO	( ) Delete
Name:	FRAZIER, MARY L	
Address:	600 N. RIO GRANDE AVENUE	
City-St-Zip:	ORLANDO, FL 32805 US	
Title:	P	( ) Delete
Name:	FRAZIER, ALVIN C	
Address:	5449 CONWAY POINT COURT	
City-St-Zip:	ORLANDO, FL 32812 US	
Title:	1 VP	( ) Delete
Name:	FRAZIER, MARVIN C	
Address:	65 N.E. 168TH STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162 US	
Title:	2 VP	( ) Delete
Name:	FRAZIER, LORENZ D	
Address:	65 N.E. 168TH STREET	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162 FL	
Title:	S	( ) Delete
Name:	MORRIS, WAYNE	
Address:	235 TOLLGATE TRAIL	
City-St-Zip:	LONGWOOD, FL 32750 US	
Title:	TREA	( ) Delete
Name:	FRAZIER, VINETTA D	
Address:	3454 ROGERS DRIVE	
City-St-Zip:	ORLANDO, FL 32805	

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:	
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 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: MARVIN C. FRAZIER 1VP 06/09/2006
Electronic Signature of Signing Officer or Director — Date