

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000002

FILED
Apr 20, 2011
Secretary of State

Entity Name: THOMAS W. MCCORMICK SCHOLARSHIP FUND CORP.

Current Principal Place of Business:

11 HARBORAGE ISLE
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

11 HARBORAGE ISLE
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 84-1684810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIXNER, TIMOTHY C ESQ.
2201 NE 17TH TERRACE
WILTON MANORS, FL 33305 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: P
Name: MCCORMICK, NUCCIA
Address: 11 HARBORAGE ISLE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VP
Name: NAIMOLI, KIM
Address: 11 HARBORAGE ISLE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VP
Name: UZELAC, CONI
Address: 11 HARBORAGE ISLE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: T
Name: NAIMOLI, STEVEN
Address: 11 HARBORAGE ISLE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: S
Name: MELLO, PRISSILA
Address: 11 HARBORAGE ISLE
City-St-Zip: FT. LAUDERDALE, FL 33316

I hereby 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 all other like empowered.

SIGNATURE: NUCCIA MCCORMICK

PRES

04/20/2011

Electronic Signature of Signing Officer or Director

Date