

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000000654

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** ROBERT WHITE ATHLETIC SCHOLARSHIP, INC.

**Current Principal Place of Business:**

3603 AVENUE O  
FORT PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4257  
FORT PIERCE, FL 349484257

**New Mailing Address:**

**FEI Number:** 20-3995766

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WHITE, EDITH  
3603 AVE. O  
FT. PIERCE, FL 34947 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  
Name: WHITE, ANDY  
Address: 3599 DYER PARK LANE  
City-St-Zip: MARIETTA, GA 30060

Title: SD  
Name: WHITE, ALANA  
Address: 1014 N 17 ST  
City-St-Zip: FT. PIERCE, FL 34950

Title: CIO  
Name: WHITE, JIMMIE  
Address: 4900 EVERGREEN AVE  
City-St-Zip: FT PIERCE, FL 34947

Title: CFO  
Name: HAYWARD, TEKEISHA  
Address: 10310 NW 8TH ST  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VP  
Name: WHITE, EDITH  
Address: 3603 AVENUE O  
City-St-Zip: FT. PIERCE, FL 34947

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:** ANDY WHITE

CEO

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date