2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2009
Secretary of State

DOCUMENT# N06000003924

Entity Name: GIFFORD HIGH SCHOOL-THOMAS/POWELL MEMORIAL SCHOLARSHIP FOUNDATION, INCORPORATED

Current Principal Place of Business:

4530 43RD CT
VERO BCH, FL 32967

New Principal Place of Business:

Current Mailing Address:

4530 43RD CT
VERO BCH, FL 32967

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUCKNER, JACK
5750 45TH ST
VERO BCH, FL 32967 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: BRADLEY, TIMOTHY JR.
Address: 4530 43RD CT
City-St-Zip: VERO BCH, FL 32967

Title: D ( ) Delete
Name: DAVIS, BEVERLY T
Address: 5865 59TH CT
City-St-Zip: VERO BCH, FL 32967

Title: D ( ) Delete
Name: HAWKINS, ERMA
Address: 1730 37TH PL
City-St-Zip: VERO BCH, FL 32967

Title: D ( ) Delete
Name: HUNTER, SAMUEL A
Address: 4206 41ST AVE
City-St-Zip: VERO BCH, FL 32967

Title: D ( ) Delete
Name: HENSICK, BETTY G
Address: 1125 12TH ST
City-St-Zip: VERO BCH, FL 32960

Title: D ( ) Delete
Name: MIZER, LELIA J
Address: 5208 BELLEFIELD DR
City-St-Zip: TAMPA, FL 33624

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 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: TIMOTHY BRADLEY D 06/09/2009
Electronic Signature of Signing Officer or Director — Date