

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005806

FILED
Feb 22, 2008
Secretary of State

Entity Name: THE SCOTT FOUNDATION OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

6245 LITTLE LAKE SAWYER DRIVE
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

PO BOX 1071
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 20-8863088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: SD () Delete
Name: SCOTT, SHAWN
Address: 6245 LITTLE LAKE SAWYER DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: TD () Delete
Name: SCOTT, ASHLEY
Address: 6245 LITTLE LAKE SAWYER DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: SCOTT, HEATHER
Address: 6245 LITTLE LAKE SAWYER DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: HAZIM, JEFFREY DR.
Address: 6245 LITTLE LAKE SAWYER DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: HAZIM, ANDREA DR.
Address: 6245 LITTLE LAKE SAWYER DRIVE
City-St-Zip: WINDERMERE, FL 34786

Title: P () Delete
Name: SCOTT, RACHEL
Address: 6245 LITTLE LAKE SAWYER DRIVE
City-St-Zip: WINDERMERE, FL 34786

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: CHRISTOPHER SCOTT

VP

02/22/2008

Electronic Signature of Signing Officer or Director

Date