

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008693

FILED
Apr 13, 2009
Secretary of State

Entity Name: NEW MT. ZION DEANSY M. BOLDEN SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

1904 LAKE DEESON DRIVE
LAKELAND, FL 33805

New Principal Place of Business:

Current Mailing Address:

1904 LAKE DEESON DRIVE
LAKELAND, FL 33805

New Mailing Address:

FEI Number: 26-0410566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERRY, MARILYN
1904 LAKE DEESON DRIVE
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

TERRY, MARILYN C
1904 LAKE DEESON DRIVE
LAKELAND, FL 33805 US

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: MARILYN C. TERRY

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TERRY, MARILYN
Address: 1904 LAKE DEESON DRIVE
City-St-Zip: LAKELAND, FL 33805

Title: VD () Delete
Name: QUARY, DELL G
Address: 366 CORONA DEL MAR STREET
City-St-Zip: LAKELAND, FL 33809

Title: SD () Delete
Name: DAVIS, JUDITH
Address: 1515 CANDYCE STREET
City-St-Zip: LAKELAND, FL 33815

Title: TD () Delete
Name: SIMMONS, SAM
Address: 1036 WEST SIXTH STREET
City-St-Zip: LAKELAND, FL 33805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TERRY, MARILYN C
Address: 1904 LAKE DEESON DRIVE
City-St-Zip: LAKELAND, FL 33805

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: DELL G. QUARY

VD

04/13/2009

Electronic Signature of Signing Officer or Director

Date