

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002018

FILED  
May 24, 2011  
Secretary of State

**Entity Name:** MADGE LEWIS SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

4700 NW 4TH COURT  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

4700 NW 4TH COURT  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 26-1887146

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEWART, CARLENE  
4700 NW 4TH COURT  
PLANTATION, FL 33317 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:** MCTAGGART, MARGARET G  
**Address:** 4700 NW 4TH COURT  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** T  
**Name:** FRAY, KARLENE DR.  
**Address:** 4700 NW 4TH COURT  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** S  
**Name:** STERLING, LORAIN  
**Address:** 4700 NW 4TH COURT  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** D  
**Name:** STEWART, CARLENE  
**Address:** 4700 NW 4TH COURT  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** D  
**Name:** LEWIS, ROY C  
**Address:** 4700 NW 4TH COURT  
**City-St-Zip:** PLANTATION, FL 33317

**Title:** D  
**Name:** FACEY, OWEN DR  
**Address:** 4700 NW 4TH COURT  
**City-St-Zip:** PLANTATION, FL 33317

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:** KARLENE FRAY

D

05/24/2011

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

\_\_\_\_\_  
Date