

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007870

FILED
Apr 06, 2009
Secretary of State

Entity Name: STEPHEN L. BOYLES SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

191 EAST HIGHWAY 100
SAN MATEO, FL 32187

New Principal Place of Business:

Current Mailing Address:

P O BOX 65
SAN MATEO, FL 32187

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURRIE, ALLYSON B ESQ.
151 CURRIE ROAD
SAN MATEO, FL 32187 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 () Delete
Name: CURRIE, ALLYSON B
Address: 151 CURRIE ROAD
City-St-Zip: SAN MATEO, FL 32187

Title: VP () Delete
Name: JOHNSON, GREG
Address: 823 DUNLAWTON AVENUE, SUITE C
City-St-Zip: PORT ORANGE, FL 32127

Title: S, T () Delete
Name: MILLS, ADELE B
Address: 371 HUNTER ROAD
City-St-Zip: PALATKA, FL 32177

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:

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: ALLYSON B CURRIE

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date