

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004330

FILED
Apr 08, 2010
Secretary of State

Entity Name: MOTHER PERRY SCHOLARSHIP FUNDS, INC.

Current Principal Place of Business:

7855 SANCTUARY CIRCLE
2
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

7855 SANCTUARY CIRCLE
2
NAPLES, FL 34104

New Mailing Address:

FEI Number: 27-0355794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, HAROLD G JR
7855 SANCTUARY CIRCLE
2
NAPLES, FL 34104 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: WILLIAMS, JUANITA
Address: 2125 EAST CROWN POINT
City-St-Zip: NAPLES, FL 34112

Title: VP
Name: WILLIAMS, IRENE
Address: 4555 25TH COURT
City-St-Zip: NAPLES, FL 34116

Title: T
Name: MELVIN, BARBARA
Address: 2400 TAMiami TRAIL N. SUITE 100, FL 9102
City-St-Zip: NAPLES, FL 34103

Title: S
Name: LINDOR, SUZE
Address: 590 LAMBTON LANE
City-St-Zip: NAPLES, FL 34104

Title: O
Name: DIXON, PEARLENE
Address: 6785 YEARBERRY LANE
City-St-Zip: NAPLES, FL 34109

Title: O
Name: WEEKS, HAROLD G
Address: 7855 SANCTUARY CIR #2
City-St-Zip: NAPLES, FL 34104

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: BARBARA RHODES-MELVIN

T

04/08/2010

Electronic Signature of Signing Officer or Director

Date