

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006356

FILED
Jan 08, 2012
Secretary of State

Entity Name: DR. DAVID C. COZART, SR. SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:

3301 NOHLCREST PLACE
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

3301 NOHLCREST PLACE
PLANT CITY, FL 33566

New Mailing Address:

FEI Number: 27-3003035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, LEVI D
8509 RIDEIN RD
TAMPA, FL 33619 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: DP
Name: COZART, GLORIA
Address: 3301 NOHLCREST PLACE
City-St-Zip: PLANT CITY, FL 33566

Title: VPT
Name: COZART, DAVID C JR
Address: 32 COLONY DRIVE EAST
City-St-Zip: WEST ORANGE, NJ 07052

Title: ST
Name: RICHARDSON, KIMBERLIE
Address: 2336 IVY AVE
City-St-Zip: BALTIMORE, MD 21214

Title: CFO
Name: LUNSFORD, KATRINA
Address: 3733 PAULA CT
City-St-Zip: LAKE LAND, FL 33812

Title: T
Name: SCHRADER, TONY ESQ
Address: 604 LIME ROCK DR
City-St-Zip: ROUND ROCK, TX 78681

Title: T
Name: COZART, WAYNE
Address: 122 TRENTON AVE
City-St-Zip: PATERSON, NJ 07513

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: GLORIA COZART

DIR

01/08/2012

Electronic Signature of Signing Officer or Director

Date