

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000008607

**FILED**  
**May 02, 2011**  
**Secretary of State**

**Entity Name:** THE MISTY SCHROEDER SCHOLARSHIP FUND INC.

**Current Principal Place of Business:**

C/O MS. TONYA THOMAS  
1219 E. CLIFTON ST  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MS. TONYA THOMAS  
1219 E. CLIFTON ST  
TAMPA, FL 33604

**New Mailing Address:**

**FEI Number:** 27-4168578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARCIA, ANTHONY  
1509 W. SWANN AVE., SUITE 240  
TAMPA, FL 33606 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:** DIR  
**Name:** THOMAS, TONYA  
**Address:** 1219 E. CLIFTON ST  
**City-St-Zip:** TAMPA, FL 33604

**Title:** BMEM  
**Name:** GARCIA, ANTHONY J  
**Address:** 1509 W. SWANN AVE STE. 240  
**City-St-Zip:** TAMPA, FL 33606

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:** ANTHONY GARCIA

BMEM

05/02/2011

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

\_\_\_\_\_  
Date