FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR -4 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N12086 (7)

1. Corporation Name

BRIGADIER GENERAL MORGAN S. TYLER SCHOLARSHIP FUND, INC.

Principal Place of Business	Mailing Address
C/O WILLIAM A. BINGHAM, JR. 81 PAINE DRIVE SE WINTER HAVEN FL 33884	C/O WILLIAM A. BINGHAM, JR. 81 PAINE DRIVE SE WINTER HAVEN FL 33884

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/14/1985
3a. Date of Last Report: 02/11/1994
4. FEI Number: 59-2650078 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

BINGHAM, WILLIAM A., JR.
81 PAINE DRIVE SE
WINTER HAVEN FL 33884

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	BINGHAM, JR., WILLIAM A.	12 NAME	
STREET ADDRESS	81 PAINE DR. S.E.	13 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	SNIVELY, JR., HARVEY B	22 NAME	
STREET ADDRESS	604 W. LAKE OTIS DR.	23 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL	24 CITY-ST-ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	ROBINSON, WILLIAM C.	32 NAME	
STREET ADDRESS	4089 ROLLINGS OAK DRIVE	33 STREET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	CULTON, ROBERT C.	42 NAME	
STREET ADDRESS	2328 VILLAGE GREEN BLVD	43 STREET ADDRESS	
CITY-ST-ZIP	PLANT CITY FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	D ☒ Change ☐ Addition
NAME	DILLIN, JOHN W.	52 NAME	MC GARAITY, SHIRLEY
STREET ADDRESS	1408 S HIGHLAND PARK DR	53 STREET ADDRESS	113 HOLMES PLACE
CITY-ST-ZIP	LAKE WALES FL	54 CITY-ST-ZIP	WINTER HAVEN FL 33884-2313
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	WOLGAST, MARVIN R.	62 NAME	
STREET ADDRESS	2347 BIRCH LANE	63 STREET ADDRESS	
CITY-ST-ZIP	LAKELAND FL	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William A Bingham 3-29-95 813-324-2208
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL, OFFICER OR DIRECTOR — Date — Daytime Phone #

0048782