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FILED
May 14 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N12086 (7)

1. Corporation Name

BRIGADIER GENERAL MORGAN S. TYLER SCHOLARSHIP FU
ND, 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



3. Date Incorporated or Qualified

11/14/1985

4. FEI Number

59-2650078

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 500 AVE L NW

26 500 AVE L NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 711

27 # 711

City & State

City & State

23 WINTER HAVEN FL

28 WINTER HAVEN FL

Zip

Country

Zip

Country

24 33881

25

29 33881

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

500 AVE L N.W. (711)

83

84 City

FL

85 Zip Code

33881

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE

NAME BINGHAM, JR., WILLIAM A.

STREET ADDRESS 81 PAINE DR. S.E.

CITY-ST-ZIP WINTER HAVEN FL

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

500 AVE L NW (711)

1.4 CITY-ST-ZIP

33881

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME SNIVELY, JR., HARVEY B

STREET ADDRESS 804 W. LAKE OTIS DR.

CITY-ST-ZIP WINTER HAVEN FL

TITLE S ☐ DELETE

NAME ROBINSON, WILLIAM C.

STREET ADDRESS 4089 ROLLINGS OAK DRIVE

CITY-ST-ZIP WINTER HAVEN FL

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME SCHROEDER, B JOE

STREET ADDRESS 16 BRIDGEWATER DR SE

CITY-ST-ZIP WINTER HAVEN FL

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME MCRARRITY, SHIRLEY

STREET ADDRESS 113 HOLMES PLACE

CITY-ST-ZIP WINTER HAVEN FL

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

MCRARRITY

TITLE D ☐ DELETE

NAME BERNTHAL, AUGUST

STREET ADDRESS 665 W LAKE OTIS DRIVE

CITY-ST-ZIP WINTER HAVEN FL

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

11/14/98 (M1) 107-5831

CR2E037 (1097)