

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25557

FILED  
Jun 25, 2009  
Secretary of State

**Entity Name:** HILLSBOROUGH COUNTY EMPLOYEES' MARTIN LUTHER KING, JR. MEMORIAL SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:**

601 EAST KENNEDY BLVD.  
TAMPA, FL 33601

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 173041  
TAMPA, FL 336720041 US

**New Mailing Address:**

**FEI Number:** 59-2897179      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

THOMAS, DEBORAH  
601 E KENNEDY BLVD  
25TH FL  
TAMPA, FL 33601 US

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

THOMAS, DEBORAH D  
601 E KENNEDY BLVD  
25TH FL  
TAMPA, FL 33601 US

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: DEBORAH D. THOMAS

06/25/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RUSSELL, JOYCE  
Address: 601 EAST KENNEDY BLVD  
City-St-Zip: TAMPA, FL 33601

Title: VPD ( ) Delete  
Name: LONDON, JANICE  
Address: 411 NORTH FRANKLIN STREET  
City-St-Zip: TAMPA, FL 33602

Title: VPD ( ) Delete  
Name: FREEMAN, GERALDINE  
Address: 601 EAST KENNEDY BLVD  
City-St-Zip: TAMPA, FL 33601

Title: TT ( ) Delete  
Name: WALKER, VIVIAN N  
Address: 306 EAST JACKSON ST 7E  
City-St-Zip: TAMPA, FL 33601

Title: ST ( ) Delete  
Name: SHAW, DIANE  
Address: 900 N ASHLEY  
City-St-Zip: TAMPA, FL 33602

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEBORAH D. THOMAS

MS.

06/25/2009

Electronic Signature of Signing Officer or Director

Date