

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37027

FILED
Apr 24, 2006
Secretary of State

Entity Name: MISS ORLANDO SCHOLARSHIP PAGEANT, INC.

Current Principal Place of Business:

10015 CRYSTALLINE CT.
ORLANDO, FL 32836

New Principal Place of Business:

2518 SANDY LANE
ORLANDO, FL 32818

Current Mailing Address:

P. O. BOX 5612
WINTER PARK, FL 32793

New Mailing Address:

FEI Number: 59-3000428 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

QUINLAN, SHARON
P. O. BOX 5612
WINTER PARK, FL 32793 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: CEO () Delete
Name: MILLER, JEAN,
Address: 961 WEDGEWOOD DR N
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: ED () Delete
Name: QUINLAN, SHARON,
Address: P. O. BOX 5612
City-St-Zip: WINTER PARK, FL 32793 US

Title: ED () Delete
Name: JONES, AMY
Address: 10015 CRYSTALLINE CT
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: MCRIGHT, JAN
Address: 3716 BRADLEY AVE
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: WHEATON, MARY
Address: 1861 ASTOR DR
City-St-Zip: WINTER PARK, FL 32792 US

Title: DST () Delete
Name: TURNIPSEED, DARBY
Address: 2518 SANDY LANE
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DST (X) Change () Addition
Name: TURNIPSEED, DARBY,
Address: 2518 SANDY LANE
City-St-Zip: ORLANDO, FL 32818

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

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

Title: D (X) Change () Addition
Name: COCHRAN, DARREN,
Address: 3602 IBIS DR
City-St-Zip: ORLANDO, FL 32803

I hereby certify that the information supplied with this filing does not qualify for the 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: DARBY G TURNIPSEED

DST

04/24/2006

Electronic Signature of Signing Officer or Director

Date