FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1**9**98 DOCUMENT #

N39514

(7)

IRARC Principal Plac	MEMORIAL SCHOLARSHIP e of Business	FOUNDATION, INC. Mailing Address			
453 WATTS WAY COCOA BEACH FL 32931 453 WATTS WAY COCOA BEACH FL 32931				3. Date Incorporated or Qualified 08/08/1990	
				4. FEI Number	Applied For
2. Principal P	lace of Business	2a. Mailing Address	······································	59-3025210	Not Applicable \$8.75 Additional
21 2AS COUNTRY CLUB DR.		26 245 COUNTRY CLUB DR.		5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State MELBOURNE, FL		City & State MELBOURNE, FL		7. Is this nonprofit corporation a homeowners association?	
Zip 24 329 ·	<u> </u>	_	Country 30 USA	 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
11. Pursuant office or ragent. I a	to the provisions of Sections 617.0502 egistered agent, or both, in the State om familiar with, and accopt the obligation	and 617.1508, Florida Statute of Florida. Such change was au ions of, Section 617.0503, Flor		PELBOULUE proporation submits this statement for the purpos pration's board of directors. I hereby accept the	E S Zip Code 3 2 9 40 e of changing its registered appointment as registered
SIGNATURE .	Signature, typed or printed name of registered agen	and title if applicable (NOTE:	Registered Agent signature re	equired when reinstating) DAT	E
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	WELLER, RICHARD I.		1.2 NAME		
STREET ADORESS	750 N. ATLANTIC AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	COCOA BEACH FL	DELETE	1.4 CHY-ST-ZIP		Change Addition
TITLE	VPD	DELETE	2.1 1fTLE	VPD	Change Addition
NAME OTREST ADDRESS	NADEL, KEITH P O BOX 41005		2.2 NAME	NADE, KEITH TIO MEDINAH RD	
STREET ADDRESS	MELBOURNE FL			METBOURNE, FL 32940	
CITY-ST-ZIP TITLE	SD	DELĒTĒ	2.4 City-ST-ZiP 3.1 Title	INGUOVENS, FC DO140	Change Addition
NAME	LAZOWSKA, GENIE		3.2 NAME		
STREET ADDRESS	172 JAMAICA DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	COCOA BEACH FL		3.4. CITY-ST-ZIP		
TITLE	TD	☐ DELETE	4.1 TITLE	70	Change Addition
NAME	Baldini, ernest a		4. 2 NAME	BALDINI, ERNEST A.	
STREET ADDRESS	453 WATTS WAY		4.3 STREET ADDRESS	245 COUNTRY CLUB DR.	
CITY-ST-ZIP	_COCOA BEACH FL		4.4 CITY - ST - ZIP	MELBOURNE, FL 3294	
TITLE		☐ DELETE	5.1 TITLE	•	Change Addition

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby 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 of an attachment with an address.

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

NAME

DELETE

ERNEST A. BALDINI

MAY 1 1998 107-757-3094

Change

FILED

Jun 25 1998 8:00am

Secretary of State