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Jan 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N43565 (3)

1. Corporation Name
REESE SCHOLARSHIP FUND, INC.



Principal Place of Business Mailing Address
1302 S.W. 25TH PLACE BOYNTON BEACH FL 33426
1302 S.W. 25TH PLACE BOYNTON BEACH FL 33426-7445

3. Date Incorporated or Qualified 05/20/1991
3a. Date of Last Report 03/01/1996

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 29 Zip Country 30
4. FEI Number 65-0266964 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
CATO, MICHAEL
1302 S.W. 25 PLACE
BOYNTON BEACH FL 33426
10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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	D CATO, MICHAEL D. 1302 S.W. 25 PLACE BOYNTON BEACH FL	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D KOEN, KERRY B. 2333 GLADES ROAD BOCA RATON FL	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	ST PENNEY, GERRY 50 S. MILITARY TRAIL WEST PALM BEACH FL	3.1 TITLE	g Hardee, Beth 1024 Northeast 14 Street, Bldg. C Gainesville, FL 32602
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	P HOLLEY, JOHN W. 2617 HUSSON AVE PALATKA FL	4.1 TITLE	D Randall, Steve 225 Newburyport Avenue Altamonte Springs, FL 32701
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D BERGEL, PETER T 100500 N. MILITARY TRAIL PALM BEACH GARDENS FL	5.1 TITLE	P Bergel, Peter T. 10500 N. Military Trail Palm Beach Gardens, FL 33410-4634
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	T Apfelbeck, Anthony 400 Alexandria Blvd. Oviedo, FL 32765
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: [Signature] 1-8-97 (561) 243-7420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0041678

CR2E037 (9/96)