2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N46264

Apr 19, 2002 8:00 AM Secretary of State

Entity Name: THE FLORIDA ASSOCIATION OF HOUSING AND REDEVELOPMENT OFFICIALS SCHOLARSHIP

FUND, INC.

Current Principal Place of Business: New Principal Place of Business:

3263 ROBINHOOD ROAD 335 BEARD STREET TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

3263 ROBINHOOD ROAD POST OFFICE BOX 14629 TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32317

FEI Number: 59-3100612 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OGBURN, LOUISE L.

3263 ROBINHOOD RD

TALLAHASSEE, FL 323128444 US

ROBERT, SKROB

335 BEARD STREET

TALLAHASSEE, FL 32303 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: ROBERT SKROB 04/19/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: PD (X) Change () Addition Name: MONAHAN, GAIL Name: MONAHAN, GAIL

 Address:
 240 SW FIRST
 Address:
 703 NE FIRST STREET

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 GAINESVILLE, FL 32601

Title: STD () Delete Title: VD (X) Change () Addition Name: OGBURN, LOUISE, Name: TURNER, RICHARD

Address: 3263 ROBINHOOD ROAD Address: 118 CEDAR STREET

City-St-Zip: TALLAHASSEE, FL City-St-Zip: DAYTONA BEACH, FL 32114

Title: PD () Delete Title: TD (X) Change () Addition Name: HINCKLEY, LYNDA Name: CREGAN, KEVIN

Address: 718 MARGARET SQ Address: 3810 INVERRAY BOULEVARD #405

City-St-Zip: WINTER PARK, FL City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete Title: D (X) Change () Addition Name: BRUNSON, SAM Name: BRUNSON, SAM

 Address:
 371 W HICKERY AVE
 Address:
 371 W HICKORY AVENUE

 City-St-Zip:
 CRESTVIEW, FL 32536
 CRESTVIEW, FL 32536
 CRESTVIEW, FL 32536

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 LAMBERT, BOB

 Address:
 Address:
 PO BOX 6416

 City-St-Zip:
 City-St-Zip:
 TITUSVILLE, FL 32796

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 HINCKLEY, LYNDA

 Address:
 Address:
 718 MARGARET SQUARE

 City-St-Zip:
 City-St-Zip:
 WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GAIL MONAHAN PD 04/19/2002