

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47694

FILED
Apr 05, 2011
Secretary of State

Entity Name: SOUTH FLORIDA AEROSPACE SCHOLARSHIP CORPORATION

Current Principal Place of Business:

% STANLEY J. BODNER
5600 NW 36TH STREET-SUITE 611
MIAMI, FL 33166

New Principal Place of Business:

% STANLEY J. BODNER
5600 NW 36TH STREET, BDLG.845-SUITE 619
MIAMI, FL 33166

Current Mailing Address:

% STANLEY J. BODNER
P.O. BOX 660466
MIAMI, FL 33266

New Mailing Address:

FEI Number: 65-0360264 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD
1500 MIAMI CENTER, STE 1500 TJM
MIAMI, FL 33131 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: PD
Name: MURPHY, TIM
Address: 201 S. BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33131

Title: VD
Name: SCHUMACHER, BERNARD
Address: 9350 SW 124TH ST
City-St-Zip: MIAMI, FL 33176

Title: VP
Name: BENITEZ, BENNY
Address: 3841 SW 147TH AVE. - STE 102
City-St-Zip: MIAMI, FL 33185

Title: VD
Name: ROSSER, JOHN P
Address: PO BOX 1
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VD
Name: HUETE, RODRIGO
Address: 1200 ANASTASIA AVE-STE 450
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby 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 all other like empowered.

SIGNATURE: STANLEY J. BODNER

TVP

04/05/2011

Electronic Signature of Signing Officer or Director

_____ Date