


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90006 017 ****61.25

DOCUMENT # N49651	
1. Entity Name EBONY SCHOLARS PROGRAM, INC.	

Principal Place of Business 2201 - 25TH AVENUE SOUTH ST. PETERSBURG FL 33712	Mailing Address 2201 - 25TH AVENUE SOUTH ST. PETERSBURG FL 33712
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34014884



MOORE CR2E037 (11/03)

2. Principal Place of Business 1721 - HIGHLAND ST. SO.	3. Mailing Address 1721 - HIGHLAND ST. SO.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State ST. PETERSBURG, FL.	City & State ST. PETERSBURG, FL.
Zip 33701	Zip 33701
Country U.S.A.	Country U.S.A.

4. FEI Number 59-3137997	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WILLIAMS, FRANCES 2201 - 25TH AVENUE SOUTH ST. PETERSBURG FL 33712 <i>Carl A. Ferguson</i>	7. Name and Address of New Registered Agent Name CARL A. FERGUSON Street Address (P.O. Box Number is Not Acceptable) 1721 - HIGHLAND ST. SOUTH City ST. PETERSBURG FL Zip Code 33701
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8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Carl A. Ferguson</i> DATE 2/18/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DAVIS, VYRLE <input type="checkbox"/> Delete 3521 FAIRFIELD AVE SAINT PETERSBURG FL 33711	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP BRYANT, PEARL <input type="checkbox"/> Delete 5825 LELAND ST. SAINT PETERSBURG FL 33715	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CALLIER, HELEN T <input type="checkbox"/> Delete 1625-28 AVENUE SOUTH SAINT PETERSBURG FL 33712	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T FERGUSON, CARL <input type="checkbox"/> Delete 1701 16TH STREET SOUTH SAINT PETERSBURG FL 33705	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JONES, CRAIG <input type="checkbox"/> Delete 1833 BONITA WAYS SAINT PETERSBURG FL 33712	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SUMMERS, LEONARD <input type="checkbox"/> Delete 1210 26TH AVENUE SOUTH ST. PETERSBURG FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>Carl A. Ferguson</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: 2/18/04 <small>Date</small>	DAYTIME PHONE: (827) 822-4442 <small>Daytime Phone #</small>
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