2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49651

FILED Apr 15, 2009 Secretary of State

Entity Name: EBONY SCHOLARS PROGRAM, INC.

Current Principal Place of Business:				New Principal Place of Business:			
5510 LAPURERTA DEL SOL BLVD.				5510 LA PURERTA DEL SOL BLVD.			
#131 SAINT PETERSBURG, FL 33715				#131 SAINT PETERSBURG, FL 33715			
Current Mailing Address:				New Mailing Address:			
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5510 LAPURERTA DEL SOL BLVD. #131				5510 LA PURERTA DEL SOL BLVD. #131			
SAINT PE	TERSBURG,	FL 33715		SAINT PE	ETERSBURG, FL 33715		
FEI Number	: 59-3137997	FEI Number Applied For ()	FEI Nur	nber Not App	plicable () Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:		Name and	d Address of New Registered Agent:		
	CLIFTON E JERTA DEL S	SOL BLVD.					
	TERSBURG,	FL 33715 US					
	e named entity e of Florida.	submits this statement for the p	purpose o	f changing i	its registered office or registered agent, or b	oth,	
SIGNATUI	RE:						
	Electro	nic Signature of Registered Ago	ent		Date		
OFFICER	S AND DIREC	CTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIREC	TOF	
Title: Name: Address: City-St-Zip:	DAVIS, VYRLE 3521 FAIRFIE			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP (STEPHENS, S 2601-59TH AV) Delete OLOMON		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	CALLIER, HEL 1625-28 AVEN			Title: Name: Address: City-St-Zip:	AT (X) Change () Addition TELLIS, JEROME H 17757 U.S. HIGHWAY 19 N CLEARWATER,, FL 33764		
Title: Name: Address: City-St-Zip:	BURNEY, CLIF 5510 LAPUER) Delete FTON E TA DEL SOL BLVD. #131 SBURG, FL 33715		Title: Name: Address: City-St-Zip:	T (X) Change () Addition BURNEY, CLIFTON E 5510 LAPUERTA DEL SOL BLVD. #131 SAINT PETERSBURG, FL 33715		
Title: Name: Address: City-St-Zip:	JONES, CRAIC 1833 BONITA			Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	ASHWOOD, C 2616-22 ST Sc			Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CLIFTON E. BURNEY T 04/15/2009