

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002919

FILED
Jan 14, 2004
Secretary of State**Entity Name:** THE BOCA GRANDE AREA CHAMBER OF COMMERCE SCHOLARSHIP FUND, INC.**Current Principal Place of Business:**5800 GASPARILLA RD.
A1
BOCA GRANDE, FL 33921**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 704
BOCA GRANDE, FL 33921**New Mailing Address:****FEI Number:** 65-0544270**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MORRISON, JUDY D
423 PALM AVENUE
BOCA GRANDE, FL 33921**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 () Delete
Name: STEWART, CAROL
Address: 421 PARK AVENUE
City-St-Zip: BOCA GRANDE, FL 33921**Title:** TD () Delete
Name: MCHUGH, DAVID
Address: 475 PARK AVENUE
City-St-Zip: BOCA GRANDE, FL 33921**Title:** VD () Delete
Name: PERKINS, BETH
Address: PO BOX 256
City-St-Zip: BOCA GRANDE, FL 33921**Title:** D () Delete
Name: SEIDENSTICKER, PATRICIA
Address: PO BOX 812
City-St-Zip: BOCA GRANDE, FL 33921**Title:** SD () Delete
Name: KNIGHT, JR., JOHNS
Address: PO BOX 174
City-St-Zip: BOCA GRANDE, FL 33921**Title:** D () Delete
Name: MORRISON, JUDY D
Address: POST OFFICE BOX 523
City-St-Zip: BOCA GRANDE, FL 33921**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VD (X) Change () Addition
Name: MCHUGH, DAVID
Address: 475 PARK AVENUE
City-St-Zip: BOCA GRANDE, FL 33921**Title:** D (X) Change () Addition
Name: DIAZ, LESLIE
Address: PO BOX 925
City-St-Zip: BOCA GRANDE, FL 33921**Title:** D (X) Change () Addition
Name: BURKHART, SANDY
Address: PO BOX 433
City-St-Zip: BOCA GRANDE, FL 33921**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD (X) Change () Addition
Name: MORRISON, JUDY D
Address: POST OFFICE BOX 523
City-St-Zip: BOCA GRANDE, FL 33921

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: CAROL STEWART

PD

01/14/2004

Electronic Signature of Signing Officer or Director

Date