2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# N95000000623

Entity Name: THETA DELTA SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:

644 CESERY BOULEVARD
SUITE 300
JACKSONVILLE, FL 32211 US

New Principal Place of Business:

Current Mailing Address:

644 CESERY BOULEVARD
SUITE 300
JACKSONVILLE, FL 32211 US

New Mailing Address:

FEI Number: 59-0542673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CAMERLENGO, JOSEPH V
644 CESERY BOULEVARD
SUITE 300
JACKSONVILLE, FL 32211 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	( ) Delete
Name:	DAVIS, DAVID	
Address:	17080 HARBOUR POINTE DRIVE, #117	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	SD	( ) Delete
Name:	SIMONS, GARY	
Address:	121 NW THIRD STREET	
City-St-Zip:	OCALA, FL 34475	
Title:	DV	( ) Delete
Name:	HANCOCK, MARK	
Address:	13033 HIDDEN BEACH WAY	
City-St-Zip:	CLERMONT, FL 34711	
Title:	D	( ) Delete
Name:	ZIMMERMAN, SANFORD	
Address:	2 PRUDENTIAL PLAZA, 18TH FLOOR	
City-St-Zip:	JACKSONVILLE, FL 32207	
Title:	D	( ) Delete
Name:	CAMERLENGO, JOSEPH V	
Address:	644 CESERY BOULEVARD, SUITE 300	
City-St-Zip:	JACKSONVILLE, FL 32211 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: JOSEPH V. CAMERLENGO D 05/01/2007

Electronic Signature of Signing Officer or Director — Date