

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000788

FILED
Apr 24, 2007
Secretary of State

Entity Name: LOUIS A. GAETA III MEMORIAL SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

2860 OLD CYPRESS NORTH
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2860 OLD CYPRESS NORTH
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0565281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAETA, NEIL J
2860 OLD CYPRESS NORTH
PALM BEACH GARDENS, FL 33410 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: DCVP () Delete
Name: GAETA, NEIL J
Address: 2860 OLD CYPRESS NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DP () Delete
Name: GAETA, BARBARA A
Address: 2872 OLD CYPRESS NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: KENNA, ASA
Address: 77 PRINCEWOOD LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: NICKLAUS, GARY T.
Address: 13415 MILES STANDISH PORT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DVP () Delete
Name: O'BRIEN, ANDREW W.
Address: 8918 MARLAMOOR LANE
City-St-Zip: WEST PALM BEACH, FL 33415

Title: DS () Delete
Name: SAMPLE, ROBERT
Address: 2551 MUIR CIRCLE
City-St-Zip: WELLINGTON, FL 33414

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
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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 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: BARBARA GAETA

PRES

04/24/2007

Electronic Signature of Signing Officer or Director

Date