2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# N95000001507

Entity Name: TERRY STEWART MEMORIAL SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

101 N. CHURCH STREET - SUITE 300
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

2500 FORTUNE RD.
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-3499983 **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:

FISHER, RANDY
101 N. CHURCH STREET - SUITE 300
KISSIMMEE, FL 34741 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:	FISHER, RANDY	
Address:	101 N. CHURCH STREET - SUITE 300	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	SD	( ) Delete
Name:	STEWART, FRANCIS	
Address:	1213 2ND AVENUE	
City-St-Zip:	MOUNT DORA, FL 32757	
Title:	D	( ) Delete
Name:	THOMAS, WILLIAM H	
Address:	101 TULIP WAY	
City-St-Zip:	KISSIMMEE, FL 34743	
Title:	D	( ) Delete
Name:	STEWART, PAT	
Address:	235 ORANGE TERRACE	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	D	( ) Delete
Name:	GOLDWIRE, ABDUL	
Address:	2500 FORTUNE ROAD	
City-St-Zip:	KISSIMMEE, FL 34744	

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: RANDY G FISHER PD 05/08/2009

Electronic Signature of Signing Officer or Director — Date