2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001507

1. Entity Name

TERRY STEWART MEMORIAL SCHOLARSHIP FUND, INC.



FILED Apr 22, 2003 8:00 am Secretary of State

04-22-2003 90062 034 ****61.25

		· · · · · · · · · · · · · · · · · · ·	<u> </u>			→			
Principal Place of Business Maili			ling Address						
· • • · · · · · · · · · · · · · · · · ·			100 LAKESHORE BLVD.						
KISSIMMEE FL 34741 KISS			AMEE FL 34741						
							<u> </u>	H 19 33 1 3 101 3 1	ish 1 3.6 1 1 3.6 1
2. Principal I	Place of Business	3. Ma	iling Address						
						(100(1)3) 4(0 (0)	DI BIŞLI BƏLLI GATIL AMILI BALIL BƏL	F1 (28 B4 B4))) 9 B	1914 F W M3 M M3
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
0.4 0.00			in a Clinto			4. FE! Number 50-2400023 Applied For			
City & State			City & State			4. FEt Number 59-3499983 Applied For Not Applicable			
Zip Country			Zip Cou		ntrv	SS 75 Additional			
					,	5. Certificate of Status Desired Fee Required			
	6. Name and Address	of Current Register	ed Agent			7. Name and Add	ess of New Registered A	gent	
					Name				
FISHER,	RANDY		Street Address (P.O. Bo)). Box Number is Not Acceptable)			
	eshore blvd.								
KISSIMMEE FL 34741									
				t	City		FL	Zip Cod	e
<u> </u>								Hr 141	
	e named entity submits this tions of registered agent.	statement for the purp	oose of changing its	registered	d office or registe	ered agent, or both, in t	he State of Florida. I am ta	amiliar with,	and accept
the congu	mono di regiotorea agenti.								
SIGNATURE									
"	Signature, typed or printed name of	registered agent and title if ap	plicable. (NOTE	E: Registered	Agent signature requir	ed when reinstating)	DATE		
7.			· 				<u> </u>		
9. Election Camp				npaign Fir	nancing	\$5.00 May Be	Make Check	Pavable	to
FILE NOW: FEE IS \$61.25			Trust Fund Contribution.			Added to Fees	Florida Depart		
10.		ERS AND DIRECTORS		11.		ADDITIONS/CHANGE	S TO OFFICERS AND DIF		
TITLE	PD BANGY		☐ Delete	TITLE				☐ Change	Addition
NAME	FISHER, RANDY	-		NAME]
STREET ADDRESS CITY-ST-ZIP	100 LAKESHORE BLV	U.		CITY-S	T ADORESS				
	KISSIMMEE FL 34741	· ····		_	51-2IF				
TITLE	SD STEAMART ERANICIS		☐ Delete	TITLE				☐ Change	Addition
NAME STREET ADDRESS	STEWART, FRANCIS 315 DESOTO CIRCLE			NAME	T ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32804	-	= -	CITY-S	* *		'- కు ి యు.క .		
	D D CHEANDO FL 32004			_				Change.	
TITLE NAME	REINHART, BRAD		☐ Delete	TITLE	1			☐ Change	☐ Addition
	100 LAKESHORE BLVI	n			T ADDRESS				
CITY-ST-ZIP	KISSIMMEE FL 34741	J .		CITY+S					
TITLE	D		☐ Delete	TITLE			•	☐ Change	Addition
NAME	THOMAS, WILLIAM H		□ Delete	NAME				onungo	
STREET ADDRESS	100 LAKESHORE BLV	D		STREE	ADDRESS				ļ
CITY-ST-ZIP	KISSIMMEE FL 34741	_		CITY-S	ST-ZIP				{
TITLE		**********	☐ Delete	TITLE				☐ Change	☐ Addition
NAME				NAME				~	
STREET ADDRESS				STREET	ADDRESS				
CITY-ST-ZIP				CITY-S	ST-ZIP				
TITLE			☐ Delete	TITLE				☐ Change	Addition
NAME				NAME	j				
STREET ADDRESS				STREET	ADDRESS				
CITY-ST-ZIP CIT					ST-ZIP				
12. I hereby	certify that the information s	supplied with this filing	does not qualify for	the ever	ntion stated in S	Section 119 07/3\(i) Flo	rida Statutae I further corti	fy that the in	formation

indicated on this report or supplied with this mining does not quality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the Information indicated on this report or suppliemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all otherwise empowered.

SIGNATURE:

4/14/03 407-518-2504