

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002158

FILED
Mar 24, 2009
Secretary of State

Entity Name: FEMINIST SCHOLARSHIP FUND, INC.

Current Principal Place of Business:

550 SE MIZNER BLVD
#510
BOCA RATON, FL 33432

New Principal Place of Business:

7453 CHABLIS COURT
BOCA RATON, FL 33433 30

Current Mailing Address:

550 SE MIZNER BLVD
#510
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 52-1933554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAWSON, DIANA
550 SE MIZNER BLVD
#510
BOCA RATON, FL 33432 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: D () Delete
Name: SHERVAN, LOUISE
Address: 5877 GATESBY ST.
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: JAFFE, SHEILA
Address: 7453 CHABLIS CT
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: ALPERT, GLORIA
Address: 8566 CASA DEL LAGO #D
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: SEIDENBERG, PEARL
Address: 2548 COCO PLUM BLVD
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: GRUNEISEN, ELLEN
Address: 222 N. FEDERAL HWY
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D () Delete
Name: BLIDEN, LINDA
Address: 10921 LAKE FOREST PLACE
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change () Addition
Name: DAWSON, DIANA S
Address: 550 SE MIZNER BLVD, #510
City-St-Zip: BOCA RATON, FL 33432

Title: SECR (X) Change () Addition
Name: JAFFE, SHEILA
Address: 7453 CHABLIS CT
City-St-Zip: BOCA RATON, FL 33433

Title: D (X) Change () Addition
Name: GRUNEISEN, ELLEN
Address: 2400 NE 16TH ST., #206
City-St-Zip: POMPANO BEACH, FL 33062

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

Title: PRES (X) Change () Addition
Name: HODGE, TORI
Address: 600 VIA LUGANO CIRCLE, #112
City-St-Zip: BOYNTON BEACH, FL 33436

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: DIANA S. DAWSON

TREA

03/24/2009

Electronic Signature of Signing Officer or Director

Date