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Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000001092 (3)

1. Corporation Name

WAYNE "BOOG" BRAUN MEMORIAL SCHOLARSHIP FUND, IN
C.

Principal Place of Business

Mailing Address

1801 LEE STREET, SUITE 100
FT. MYERS FL 33901

1801 LEE STREET, SUITE 100
FT. MYERS FL 33901-2933



3. Date Incorporated or Qualified
02/26/1996

3a. Date of Last Report
2-26-96

2. Principal Place of Business

2a. Mailing Address

21 1601 Lee Street

26 1601 Lee St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 100

27 Suite 100

City & State

City & State

23 Fort Myers

28 Fort Myers, FL.

Zip

Country

Zip

Country

24 33901

25 Lee

29 33901

30 Lee

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NOTTINGHAM, LEROY
1601 LEE STREET, SUITE 100
FT. MYERS FL 33901

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Leroy Nottingham
Signature, typed or printed name of registered agent and title (if applicable)

Leroy Nottingham
(NOTE: Registered Agent signature required when reinstating)

6-8-97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D
STREET ADDRESS ACKERT, RICHARD C
CITY-ST-ZIP 1501 HEITMAN STREET
FT. MYERS FL 33901

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME D
STREET ADDRESS D'ALLESANDRO, JOSEPH P
CITY-ST-ZIP LEE COUNTY COURTHOUSE, 1700 MONROE ST.
FT. MYERS FL 33901

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME D
STREET ADDRESS NOTTINGHAM, LEROY
CITY-ST-ZIP 1601 LEE STREET, SUITE 100
FT. MYERS FL 33901

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)