

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

**FILED**  
**Jan 15, 2003 8:00 am**  
**Secretary of State**

01-15-2003 90223 033 \*\*\*\*61.25

**DOCUMENT # N97000001619**

1. Entity Name

**NWFROC SCHOLARSHIP FUND, INC.**



Principal Place of Business

**131 WYNNHAVEN BEACH ROAD  
MARY ESTHER FL 32569**

Mailing Address

**131 WYNNHAVEN BEACH ROAD  
MARY ESTHER FL 32569**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3434498**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CULLEN, WILLIAM J  
131 WYNNHAVEN BEACH ROAD  
MARY ESTHER FL 32569**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	GLUNN, FRANKLIN K	1069 EMERALD BAY DRIVE	DESTIN FL 32541	<input type="checkbox"/>	<input type="checkbox"/>
D	SIRNEY, JOHN A	51 POQUITO ROAD	SHALIMAR FL 32579-1115	<input type="checkbox"/>	<input type="checkbox"/>
D	HOWARD, HILL	2403 PARKER DR	NICEVILLE FL 32578-2316	<input type="checkbox"/>	<input type="checkbox"/>
D	GARDNER, JACK	200 MIRACLE STRIP PKWY. S.W. #205	FORT WALTON BEACH FL 32548	<input type="checkbox"/>	<input type="checkbox"/>
D	GORDAN, THOMAS	731 FORREST SHORES DR	MARY ESTHER FL 32569-2704	<input type="checkbox"/>	<input type="checkbox"/>
D	MCCARTHY, JAMES F	200 WYNNHAVEN BEACH RD	MARY ESTHER FL 32569-2717	<input type="checkbox"/>	<input type="checkbox"/>

12. I 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 report or supplemental 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 other like empowered.

SIGNATURE:

**SECRETARY**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Jan 15, 2003**

**581-0306**

CR2E037 (10/02)