2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# N98000004645

Entity Name: ASHLEY M. OLESEN MEMORIAL SCHOLARSHIP, INC.

Current Principal Place of Business:

11388 OKEECHOBEE BLVD.
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

11388 OKEECHOBEE BLVD.
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 65-0911523 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EWING, ROBERT H
11388 OKEECHOBEE BLVD.
ROYAL PALM BEACH, FL 33411 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: DPT ( ) Delete
Name: EWING, ROBERT H
Address: 2055 HENLEY PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: DVS ( ) Delete
Name: VAN WAGNER, BARRY
Address: 3 PALAMA WAY
City-St-Zip: SEWALLS POINT, FL 34996

Title: D ( ) Delete
Name: VAN WAGNER, WILLIAM
Address: 3 PALAMA WAY
City-St-Zip: SEWALL POINT, FL 34996

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT H. EWING DPT 04/25/2005

Electronic Signature of Signing Officer or Director — Date