

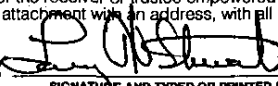


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90082 023 ****61.25

DOCUMENT # N98000005928 1. Entity Name SHEET METAL WORKERS LOCAL 32 SCHOLARSHIP FUND, INC.					
Principal Place of Business 20375 NE 15TH COURT NORTH MIAMI BEACH, FL 33179-2709			Mailing Address 20375 NE 15TH COURT NORTH MIAMI BEACH, FL 33179-2709		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 65-0893068	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent STEWART, LARRY 20375 NE 15TH COURT NORTH MIAMI BEACH, FL 33179-2709				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;"> SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 35%; text-align: right;"> Larry W. Stewart Pres. <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 5%; text-align: right;"> 1/27/04 <small>DATE</small> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 </div> </div>					
TITLE	D CRAVEY, JOHN STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP NORTH MIAMI BEACH, FL 331792709	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D BENNETT, EDWARD P STREET ADDRESS 5906 FARRAGUT ST. CITY-ST-ZIP HOLLYWOOD, FL 33021	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD GIORDANO, PAUL STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP NORTH MIAMI BEACH, FL 331792709	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	STD STATLER, SCOTT STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP NORTH MIAMI BEACH, FL 331792709	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	PD STEWART, LARRY STREET ADDRESS 20375 NE 15TH COURT CITY-ST-ZIP NORTH MIAMI BEACH, FL 331792709	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  Larry W. Stewart Pres. 1/27/04 (505) 651-5971 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					