

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 10, 1999 8:00 am
Secretary of State

03-10-1999 90205 020 ***158.75

DOCUMENT # P94000019918

1. Corporation Name

KENDALL JUNIOR SCHOLARSHIP FUND, INC.

Principal Place of Business

10950 S.W. 105TH AVENUE
MIAMI FL 33176
US

Mailing Address

10950 S.W. 105TH AVENUE
MIAMI FL 33176
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/11/1994

4. FEI Number

65-0380129

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

RAUCH, MICKEY
10950 S.W. 105TH AVENUE
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name JAMES A. DELEONARDIS

82 Street Address (P.O. Box Number is Not Acceptable) 11225 S.W. 109TH AVENUE

83

84 City MIAMI FL 85 Zip Code 33176

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

JAMES A. DELEONARDIS 460/TREASURER 1-6-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME HOLTHUS, GARY N
STREET ADDRESS 14375 SW 62ND STREET
CITY-ST-ZIP MIAMI FL

TITLE ST ☒ DELETE
NAME RAUCH, MICKEY
STREET ADDRESS 10950 SW 105TH AVENUE
CITY-ST-ZIP MIAMI FL 33176

TITLE VP ☐ DELETE
NAME HUNTER, STEVE
STREET ADDRESS 12945 S.W. 66TH TERRACE DRIVE
CITY-ST-ZIP MIAMI FL 33183

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 714 N.W. 38TH ST.
1.4 CITY-ST-ZIP GAINESVILLE, FLORIDA 32607

2.1 TITLE SECRETARY/TREASURER ☒ Change ☐ Addition
2.2 NAME JAMES A. DELEONARDIS
2.3 STREET ADDRESS 11225 SW 109TH AVENUE
2.4 CITY-ST-ZIP MIAMI, FLORIDA 33176

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

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

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

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

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES A. DELEONARDIS

Date

Daytime Phone #

1-6-99

305-251-5171

CR2E034 (11/98)