

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 16, 2009  
Secretary of State**

DOCUMENT# N97000001964

Entity Name: JUSTIN HESS SCHOLARSHIP FOUNDATION, INC.

**Current Principal Place of Business:**

96276 CAYMAN CIR  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

96276 CAYMAN CIR  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

FEI Number: 59-3443220      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALVAREZ, ALEXA  
311 CENTRE STREET  
FERNANDINA BEACH, FL 320351130 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: VP      ( ) Delete  
Name: WATSON, PAULETTE  
Address: 1520 FRANKLIN ST  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD      ( ) Delete  
Name: MCCONNELL, DENICE  
Address: 229 MARY'S CT  
City-St-Zip: SAINT MARYS, GA 31558

Title: PD      ( ) Delete  
Name: MARLOW, GARY  
Address: 96276 CAYMAN CIR  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T      ( ) Delete  
Name: MARLOW, NANCY  
Address: 96276 CAYMAN CIR  
City-St-Zip: FERNANDINA BEACH, FL 32034

**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:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NANCY J. MARLOW

T

01/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date