

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717172

Entity Name: HALLANDALE SCHOLARSHIP FUND, INC.**Current Principal Place of Business:**306 W. HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009**Current Mailing Address:**PO BOX 1331
HALLANDALE BEACH, FL 33008**FEI Number:** 23-7087801**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANDEL, SUSAN
306 W. HALLANDALE BEACH BLVD.
HALLANDALE BEACH, FL 33009 US*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

Officer/Director Detail :

Title VP, DIRECTOR
Name SELZ, JUDITH
Address 717 LAYNE BLVD.
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name OSHINSKY, LEONARD
Address 350 E LAS OLAS BLVD., STE 970
City-State-Zip: FORT LAUDERDALE FL 33301

Title SECRETARY, DIRECTOR
Name MCCANN-COLLIEE, MARIAN
Address 750 NW 8TH AVENUE
City-State-Zip: HALLANDALE BEACH, FL 33009

Title DIRECTOR
Name PAPPAS, ROBERT J.
Address 5165 NW 122ND AVE.
City-State-Zip: CORAL SPRINGS FL 33076

Title VP, DIRECTOR
Name GREAYER, JEFFREY H
Address 10060 NW 10TH STREET
City-State-Zip: PLANTATION FL 33322

Title TREASURER, DIRECTOR
Name CESAROTTI, JOSEPH
Address 2844 TIMBER CREEK CIRCLE
City-State-Zip: BOCA RATON FL 33431

Title PRESIDENT, DIRECTOR
Name DEAN, GERALD
Address 726 NW 1ST COURT
City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR
Name ITTY, LENA R
Address HALLANDALE ELEMENTARY SCHOOL
900 SW 8TH STREET
City-State-Zip: HALLANDALE BEACH FL 33009

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I hereby 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 all other like empowered.

SIGNATURE: LEONARD OSHINSKY**DIRECTOR****01/27/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WATSON-WILKIN, KATHLEEN
Address	HALLANDALE HIGH SCHOOL 720 NW 9TH AVE.
City-State-Zip:	HALLANDALE BEACH FL 33009