

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004473

Entity Name: MISS FLORIDA SCHOLARSHIP PROGRAM, INC.**Current Principal Place of Business:**36802 SUWANEE WAY
DADE CITY, FL 33525**Current Mailing Address:**P O BOX 92865
LAKELAND, FL 33804 US**FEI Number:** 45-0484843**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, JERRELL
36802 SUWANEE WAY
DADE CITY, FL 33525 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:** JERRELL WILLIAMS

02/16/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	WILLIAMS, JERRELL KEITH
Address	P. O. BOX 1775
City-State-Zip:	DADE CITY FL 33526
Title	SECRETARY
Name	TOPPING, MICHELLE
Address	2980 HAINES BAYSHORE RD # 160
City-State-Zip:	CLEARWATER FL 33760-1524
Title	DIRECTOR
Name	MCKENNA, JENNIFER
Address	9226 CROMWELL PARK PLACE
City-State-Zip:	ORLANDO FL 32827
Title	DIRECTOR
Name	SEANE, NGO MAJOVA
Address	4169 RIPKEN CIRCLE
City-State-Zip:	JACKSONVILLE FL 32224

Title	DIRECTOR
Name	STORMS, NORMA
Address	2700-101 MIZELL AVENUE
City-State-Zip:	AMELIA ISLAND FL 33034
Title	DIRECTOR
Name	KEPRIOS, KRIS
Address	2701 LAKE MYRTLE PARK RD.
City-State-Zip:	AUBURNDALE FL 33823
Title	DIRECTOR
Name	DICKS, JACLYN RAULERSON
Address	1642 7TH AVE UNIT 527
City-State-Zip:	SAN DIEGO CA 92101
Title	DIRECTOR
Name	STERN, JANICE
Address	890 BROOKMEADOW CT.
City-State-Zip:	ORLANDO FL 32828

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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: JERRELL KEITH WILLIAMSCHAIRMAN OF THE
BOARD

02/16/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ROSCOE, ADELL
Address 138 LANDS END WAY
City-State-Zip: JUPITER FL 33458

Title DIRECTOR/TREASURER
Name BUSH, SUSAN
Address 2506 WINTER PARK RD
City-State-Zip: WINTER PARK FL 32789