

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011806

Entity Name: MAMA SCHOLARSHIP PROGRAM, INC.**Current Principal Place of Business:**6011 S.W. 136 AVENUE
SOUTHWEST RANCHES, FL 33330**Current Mailing Address:**6011 S.W. 136 AVENUE
SOUTHWEST RANCHES, FL 33330**FEI Number:** 45-0584693**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WALKER, ROSE A
6011 S.W. 136 AVE
SOUTHWEST RANCHES, FL 33330 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:** ROSE A. WALKER

04/06/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	PRENDERGAST, JOY
Address	6011 S.W. 136 AVENUE
City-State-Zip:	SOUTHWEST RANCHES FL 33330

Title	S
Name	HARVEY, BEVERLY
Address	6011 S.W. 136 AVENUE
City-State-Zip:	SOUTHWEST RANCHES FL 33330

Title	DV
Name	WILLIAMS, ROSE A
Address	6011 S.W. 136 AVENUE
City-State-Zip:	SOUTHWEST RANCHES FL 33330

Title	T
Name	ROWE, DORRELL
Address	6011 S.W. 136 AVENUE
City-State-Zip:	SOUTHWEST RANCHES FL 33330

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: ROSE A. WILLIAMS**DIRECTOR**

04/06/2021

Electronic Signature of Signing Officer/Director Detail

Date