

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001619

Entity Name: NWFMOA SCHOLARSHIP FUND, INC.**Current Principal Place of Business:**56 11TH ST
SHALIMAR, FL 32579**Current Mailing Address:**56 11TH ST
SHALIMAR, FL 32579 US**FEI Number: 59-3434498****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PARISOT, DAVID
56 11TH ST
SHALIMAR, FL 32579 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: DAVID A. PARISOT****02/16/2015**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PARISOT, DAVID
Address 56 11TH ST
City-State-Zip: SHALIMAR FL 32579

Title DIRECTOR
Name ALLEN, ROBERT J
Address 108 LINDLEY RD
City-State-Zip: CRESTVIEW FL 32536

Title DIRECTOR
Name STEARNS, AL
Address 2 IPSWICH CIRCLE
City-State-Zip: FORT WALTON BEACH FL 32547

Title DIRECTOR
Name MATHESON, LES
Address 31 EMORY ST
City-State-Zip: MARY ESTHER FL 32569

Title DIRECTOR
Name MOORE, JERRY
Address 119 WAYNEL CIRCLE
City-State-Zip: FORT WALTON BEACH FL 32547

Title DIRECTOR
Name LITKE, DON
Address 2422 EDGEWATER DR
City-State-Zip: NICEVILLE FL 32578

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: DAVID A. PARISOT**PRESIDENT****02/16/2015**

Electronic Signature of Signing Officer/Director Detail

Date