2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N00000006454

THE RAYMOND GEORGE AND RUTH BITNER FISHER FOUNDATION, INC.



FILED Mar 10, 2005 08:00 AM **Secretary of State**

Principal Place of Business

1216 DEVONSHIRE WAY

PALM BEACH GARDENS, FL 33418

Mailing Address

1216 DEVONSHIRE WAY

PALM BEACH GARDENS, FL 33418



DO NOT WRITE IN THIS SPACE

02192005 No Chg-NP CR2E037 (10/03) Applied For 4. FEI Number

31-1759529

Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

FORBES, PHILIP H PL 11382 PROSPERITY FARMS ROAD **SUITE 227** PALM BEACH GARDENS, FL 33410

DO NOT WRITE IN THIS SPACE

[
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed of printed name of registered agent and the Lacoticable. (NOTE Registered Agent agenture required when missiating) DATE						
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Financ Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRE	CTORS	, , , , , , , , , , , , , , , , , , , 			
TITLE NAME STREET ADDRESS CITY-ST ZIP	PD FISHER, RUTH B 1216 DEVONSHIRE WAY PALM BEACH GARDENS, FL 33418					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FISHER, STEPHEN B 1216 DEVONSHIRE WAY PALM BEACH GARDENS, FL 33418					
TITLE NAME STREET ADDRESS CITY ST ZIP	TD SCHARCH, TED A BANK OF AMERICA 900 S. FED. HWY. 4TH FLR STUART, FL 34994			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FORBES, PHILIP H 11382 PROSPERITY FARMS ROAD SUITE 227 PALM BEACH GARDENS, FL 33410					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY - ST - ZIP						
12. I horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information						

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

05