

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT****FILED**
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # N94000003236																																																		
1. Entity Name RISING STARS EDUCATION & SPORTS FOUNDATION, INC.																																																		
Principal Place of Business 3082 PRESTIGE DR CLEARWATER, FL 33759-1611 US		Mailing Address 3082 PRESTIGE DR CLEARWATER, FL 33759-1611 US																																																
DO NOT WRITE IN THIS SPACE																																																		
6. Name and Address of Current Registered Agent WALDRON, PAMELA 3082 PRESTIGE DR CLEARWATER, FL 33759		 06302004 No Chg-NP CR2E037 (10/03) 4. FEI Number 59-3254371 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required Applied For ☐ Not Applicable																																																
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.		DO NOT WRITE IN THIS SPACE																																																
SIGNATURE _____ Signature, typed or printed name of registered agent and filer if applicable (NOT: Registered Agent signature required when re-issuing)																																																		
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																
10. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>CD</td> </tr> <tr> <td>NAME</td> <td>WALDRON, PETER E</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3082 PRESTIGE DR</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 337591611</td> </tr> <tr> <td>TITLE</td> <td>VPD</td> </tr> <tr> <td>NAME</td> <td>TURNER, RICARDO A</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1917 E AIRE LIBRE AVENUE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>PHOENIX, AZ</td> </tr> <tr> <td>TITLE</td> <td>STD</td> </tr> <tr> <td>NAME</td> <td>WING, PHILIP</td> </tr> <tr> <td>STREET ADDRESS</td> <td>10032 HORSESHOE CLOSE</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>BELVIDERE, IL</td> </tr> <tr> <td>TITLE</td> <td>D</td> </tr> <tr> <td>NAME</td> <td>JONES, ROY</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1770 E MARKET ST #402</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>YORK, PA</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	CD	NAME	WALDRON, PETER E	STREET ADDRESS	3082 PRESTIGE DR	CITY-ST-ZIP	CLEARWATER, FL 337591611	TITLE	VPD	NAME	TURNER, RICARDO A	STREET ADDRESS	1917 E AIRE LIBRE AVENUE	CITY-ST-ZIP	PHOENIX, AZ	TITLE	STD	NAME	WING, PHILIP	STREET ADDRESS	10032 HORSESHOE CLOSE	CITY-ST-ZIP	BELVIDERE, IL	TITLE	D	NAME	JONES, ROY	STREET ADDRESS	1770 E MARKET ST #402	CITY-ST-ZIP	YORK, PA	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: 		3.30.04 727-669-1408 Date Telephone Number																																																