

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 N9700000131

1. Corporation Name

THE RICHARD WILBUR SOCIETY, INC.

Principal Place of Business								
LETTERS COLLEGIUM - ECKERD COLLEGE 4200 - 54TH AVENUE SOUTH ST. PETERS 3URG FL 33711								

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

LETTERS COLLEGIUM - ECKERD COLLEGE 4200 - 54TH AVENUE SOUTH ST. PETERSBURG FL 33711

FILED Apr 26, 1999 8:00 am § Secretary of State

04-26-1999 90218 039 ****61.25



3. Date incorporated or Qualifed

01/06/1997 4. FEI Number

59-3427163

City & S at	^	City & State						\$8.75 Additional		
23	0	28			5. Certificate of Status E	esired		Fee Re		
Zip	Country	Zip	Country	ountry		6. Election Campaign F	inancing		\$5.00	∖1ay Be
24	25	25 29 30				Trust Fund Contribut	ion		Added to	Fees
		10. Name and Address of New Registered A								
			81	l Nar	ne					
BROOKER, JEWEL S PROF					Street Acdress (P.O. Box Number is Not Acceptable)					
LETTERS	83									
4200 - 54TH AVENUE SOUTH										
ST. PETERSBURG FL 33711					,				85 Zip C	ode
			84	′				<u> </u>	<u> </u>	
11. Pursuant	to the provisions of Sections 617.0502 registered agent, or both, in the State of	and 617.1508, Florida Statutes	, the abov	e-nam	ed corpo	oration submits this statements board of directors. I have	nt for the p	purpose of	changing its	registered stered
office crir	egistered agent, or both, in the State o im familiar with, and accept the obligati	f Florida. Such change was ਰੁਪਰ ons of, Section 617.0503, Florid	norized by la Statute:	y merci S.	nporano	it's board of threctors. Their	eby accep	t trie apt o	manion as rog	, 0.0.02
										-
SIGNATURE Signature, typed or printed na ne of registered agent and title if applicable. (NOT = Registered Agent signature required when reinstating) DATE 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS										
12.	OFFICERS ANI		13.			ADDITIONS/CHANGE	S TO OFF	ICERS AN		
TITLE	DP	☐ DELETE							Change	☐ Addition
NAME	BROOKER, JEWEL S									
STREET ADDRESS	TO A CONTINUE COURT!			ET ADDRE	:SS					
CITY-ST-ZIP	ST PETERSBURG FL 33705			ST-ZIP						
TITLE	VD	☐ DELETE							Change	☐ Addition
NAME	MICHELSON, BRUCE									
STREET ADDRESS ENGLISH DPT UNIV OF ILL 608 S WRIGHT ST			2.3 STREE	ET ADDRI	:SS					}
CITY-ST-ZIP	URBANA FL 61801		2. 4 CITY-	ST-ZIP						
TITLE	DST	☐ DELETE	3 1 TITLE						Change	Addition
NAME	SONNENBURG, PAUL									
STREET ADDRESS	MALL DAMPHINE DI LOPE ANAL			ET ADDRE	ss					ļ
CITY-ST-ZIP	WASHINGTON DC 20016-2525			ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE						☐ Change	☐ Addition
NAME			4, 2 NAME	•						
STREET ADORESS			4.3 STREE	ET ADDRI	:SS					
CITY-ST-ZIP		_	4 4 CITY-5	ST-ZIP						
TITLE		☐ DELETE	51 TITLE						Change	Addition
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREE	ET ADDRE	SS					
CITY-ST-ZIP			54 CITY-5	ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE						Change	Addition
NAME			6.2 NAME							}
STREET ADDRESS			6.3 STREE	ET ADDRI	SS		•			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP				-		

It hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGN OUR PARTIES AND TYPED OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

April 21, 99 727867653.

CR2E037 (11/98)

App ied For

Not Applicable