2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N9900001433



FILED Apr 10, 2003 8:00 am § Secretary of State

RICKY KING FOUNDATION, INC.					-10-2003 90109 015	,	.23
Principal Place of Business 5051 CASTELLO DR. STE 34 103		Mailing Address 5051 CASTELLO DR. STE. 38 2 NAPLES FL 34103		1 × 0 0 () (0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	18161 SENIC REIKI BENIC BENIC BENIC		1188
2. Principal Place of Business 3.		3. Mailing Address					
Suite Suite 21		Surre, Apt. #, btc.		☐ CHECK HERE IF MAKING CHANGES			
City & Sta	te	City & State		4. FEi Number 59 -	3574310		pplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Statu	us Desired	8.75 Add	litional d
	6. Name and Address of Current R	legistered Agent	Name	7. Name and Addres	ss of New Registered Ag	ent	
CARDILLO, JOHN 3550 E TAMIAMI TRAIL NAPLES FL 34112-4905		Street Address (P.O. Box Number is Not Acceptable)					
				Officer Address (1.0. Gov Hamber to Apr. Acceptable)			
			City		FL	Zip Code	
	e named entity submits this statement for tions of registered agent.	the purpose of changing its reg	gistered office or registe	ered agent, or both, in the		niliar with, a	and accept
# Obliga	nons of registered agent.						
SIGNATURE	Signature, typed or printed name of registered agent an	nd title if applicable. (NOTE: Re	egistered Agent signature require	ed when reinstating)	DATE		
FILE NOW: FILE IN AD1.70							
	FILE NOW: FEE IS \$61.25	9. Election Campa Trust Fund Cont		\$5.00 May Be Added to Fees	Make Check I Florida Departm		
10.	OFFICERS AND DIRE	Trust Fund Cont		Added to Fees		ent of S	State
		Trust Fund Cont	tribution.	Added to Fees	Florida Departm	ent of S	State
10.	OFFICERS AND DIRE TD BERRY, DONALD L 801 LAUREL OAK DR #303	Trust Fund Cont	tribution. 11. TITLE	Added to Fees	Florida Departm	CTORS IN	State
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRE TD BERRY, DONALD L 801 LAUREL OAK DR #303 NAPLES FL 34108 SD	Trust Fund Cont	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Florida Departm TO OFFICERS AND DIRE	CTORS IN	State
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS	OFFICERS AND DIRE TD BERRY, DONALD L 801 LAUREL OAK DR #303 NAPLES FL 34108 SD CARDILLO, LINDA 395 RIDGE DRIVE	Trust Fund Cont	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANGES	Florida Departm TO OFFICERS AND DIRE	CTORS IN Change	10 Addition
110. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME - STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE TD BERRY, DONALD L 801 LAUREL OAK DR #303 NAPLES FL 34108 SD CARDILLO, LINDA	Trust Fund Cont	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/CHANGES	Florida Departm TO OFFICERS AND DIRE	CTORS IN Change Change	10 Addition Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRE TD BERRY, DONALD L 801 LAUREL OAK DR #303 NAPLES FL 34108 SD CARDILLO, LINDA 395 RIDGE DRIVE NAPLES FL 34108 D COOK, DEBBIE 4246 CUTLASS LN NAPLES FL 34108 D	Trust Fund Cont	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Added to Fees ADDITIONS/CHANGES	Florida Departm TO OFFICERS AND DIRE	CTORS IN Change Change	10 Addition Addition
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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)(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:

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