

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000001717

Entity Name: ARTHUR N. RUPE FOUNDATION, INC.**Current Principal Place of Business:**3700 STATE ST, STE. 300
SANTA BARBARA, CA 93105**Current Mailing Address:**3700 STATE ST, STE.300
SANTA BARBARA, CA 93105 US**FEI Number: 77-0278838****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CD
Name	RUPE, ARTHUR N
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

Title	TD
Name	HUNT, RICHARD L
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

Title	P
Name	HENRIE, MARK C
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

Title	S
Name	VAN AACKEN, SUSAN C
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

Title	D
Name	SCHWARZ, BEVERLY M
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

Title	D
Name	DENNIS, KIM
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

Title	D
Name	HUGGINS, JAMES S
Address	3700 STATE ST, STE. 300
City-State-Zip:	SANTA BARBARA CA 93105

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: SUSAN C. VAN AACKEN**SECRETARY****01/15/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date