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NONPROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name 706445

(4)

RICHARDSON FOUNDATION, INC.

FILED					
Jun 16 1997	8:00am				
Secretary of	of State				



Principal Place of Business Mailing Address		- F. LODDIKA HABILI BORIND OZIFEK BIZILI BIRDI BILIL BEDIL KIZIL BIDIL DIBIL DEBIL BIDIL ABDI				
1626 - 90TH AVENUE 1626 - 90TH AVENUE						
P.O. BOX 339	ENVE	P.O. BOX 339				
VERO BEACH FL	L 32961-7339	VERO BEACH FL 32961-03	339		3. Date Incorporated or Qualified	3a. Date of Last Report
					11/20/1963	05/01/1996
2. Principal'Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	26		59-1027379 Not Applicab	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27						Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23 Zip	Country	28 Zip	Country		B. This corporation has liability for i	
24	25	29	30			Yes No
<u>e</u> 41	9. Name and Address of Current		1221		10. Name and Address of New Re	gistered Agent
			81	Name		
RICHARD	SON, DANFORTH K		82	Street Addi	ress (P.O. Box Number is Not Acceptab	ule)
1855 28J					Toda (1.10. Box 1741) Bot to 1701 Todaptas	
	ACH FL 32960		83	_		
			84	City		85 Zip Code
\ <u></u>				·		FL T
office or re	enistered enent or both in the State (of Florida. Such channe was	authorized by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered the appointment as registered
agent. I ar	m familiar with, and accept the obliga	tions of Section 617.0503, F	lorida Statutes		non a board of an ooster	A the attended of the control of the
SIGNATURE _						
	Bignature, typed or printed name of registered agen OFFICERS AND		TE: Registered Agen	I signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DERS AND DIRECTORS IN 12
12. TITLE	PD OFFICERS AND	DELETE	1.1 TOLE		Abbittorio/orantese to street	Change Addit
NAME	RICHARDSON, DANFORTH K	—	1.2 NAME			
STREET ADDRESS	1855 - 28TH AVE		1.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BCH, FL 00000		1.4 CITY-ST	1		
TITLE	VD	DELETE	2.1 TITLE			☐ Change ☐ Addit
NAME	RICHARDSON, MAJORIE H		2.2 NAME			
STREET ADDRESS	1855 - 28TH AVE		2.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BCH, FL 00000		2 4 CITY-S	T-ZIP		
TITLE	10	☐ DELETE	3.1 TITLE			Change C Addit
NAME	LUTHER, NANCY R		3.2 NAME			
STREET ADDRESS	555 SOUT A1A		3.3 STREET	ADDRESS		
CITY-ST-ZIP	VERO BCH, FL 00000	D oc. sts	3.4. CITY - S	T-ZIP		Channe I Addi
TITLE	SD	☐ DELETE	4.1 TITLE			Change Addil
NAME	HOPKINS, SUSAN R		4. 2 NAME			
STREET ADDRESS	1580 GRACEWOOD LN.		4.3 STREET			
CITY-ST-ZIP	VERO BCH FL 32963	DELETE	4.4 CITY - ST 5.1 TITLE	- ZIP		Change Addi
TITLE	TD PEREZ, TOMAS RENE	- Direct	5.1 TITLE 5.2 NAME			CT Ottorigo CT 1.000
NAME OTDEET ADDRESS	2019 CORTEZ AVE		5.2 NAME 5.3 STREET	ADDRESS		
STREET ADDRESS	VERO BCH, FL 00000		5.4 CITY - ST			
CITY-ST-ZIP TITLE	\$D	DELETE	6.1 TITLE	-10		Change Addit
NAME	HOPKINS, SUSAN R		6.2 NAME			,
STREET ADDRESS	265 RIVERWAY DR		6.3 STREET	ADDRESS		
City-ST-ZIP	VERO BCH, FL 00000		6.4 CITY-ST			
44 Ldo boreb	ou cortify that the information supplier	with this filing does not qua	lify for the exer	mption states	d in Section 119.07(3)(i), Florida Statute	s. I further certify that the
information	n indicated on this annual report or si flicer or director of the corporation er	upplemental annual report is the receiver or trustee en po	true and accu wered to execu	rate and that ute this repo	it my signature shall have the same lega ort as required by Chapter 617, Florida S	il effect as it made under dain; Statutes; and that my name
appears Ir	n Block 12 or Block 13 if changed, or	on an attachment with an ac	dress.		ort as required by Chapter 617, Florida S	