


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90173 024 \*\*\*\*61.25

<b>DOCUMENT # 706445</b> 1. Entity Name <b>RICHARDSON FAMILY FOUNDATION, INC.</b>					
Principal Place of Business <b>1626 - 90TH AVENUE P.O. BOX 339 VERO BEACH FL 32961-7339</b>			Mailing Address <b>1626 - 90TH AVENUE P.O. BOX 339 VERO BEACH FL 32961-7339</b>		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 339 Vero Beach, FL</b>			
City & State		City & State			
Zip	Country	Zip	Country		
32961		U.S.A.			
6. Name and Address of Current Registered Agent <b>RICHARDSON, DANFORTH K 1855 28TH AVE. VERO BEACH FL 32960</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make Check Payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RICHARDSON, DANFORTH K 1855 - 28TH AVE VERO BEACH FL 32960	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KAHLE, SANDRA R 6020 SW 5TH ST VERO BCH FL 32968	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LUTHER, NANCY R 555 SOUTH A1A VERO BEACH FL 32963	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HOPKINS, SUSAN R 1580 GRACEWOOD LN. VERO BCH FL 32963	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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:**

*Dan K. Richardson*  
 Danforth K. Richardson, Chairman, Pres.

4/04/05

Daytime Phone #