

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90023 005 ****61.25

DOCUMENT # 722378

1. Entity Name

THE EDWARD C. STUART FOUNDATION INCORPORATED



Principal Place of Business

220 EAST MAIN STREET, SUITE I
BARTOW FL 33830
US

Mailing Address

P O BOX 250
BARTOW FL 33831
US



2. Principal Place of Business

210 East Main Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-6142151

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOSWELL, C.A.
245 SOUTH CENTRAL AVE
BARTOW FL 33830

7. Name and Address of New Registered Agent

Name Donald H. Wilson Jr.

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VPD	<input type="checkbox"/> Delete
NAME	TERRY, NELLE K.S.	
STREET ADDRESS	220 E MAIN ST	
CITY- ST- ZIP	BARTOW FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	STUART, W H JR	
STREET ADDRESS	220 E MAIN ST	
CITY- ST- ZIP	BARTOW FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	STUART, NANCY S	
STREET ADDRESS	220 E MAIN ST	
CITY- ST- ZIP	BARTOW FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	TERRY, JEAN	
STREET ADDRESS	220 E MAIN ST	
CITY- ST- ZIP	BARTOW FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CROSLAND, STUART	
STREET ADDRESS	1323 STEWART STREET	
CITY- ST- ZIP	WINTER PARK FL 32789	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	210 E Main St	
CITY- ST- ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	210 E Main St	
CITY- ST- ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	210 E Main St	
CITY- ST- ZIP		
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STREET ADDRESS	210 E Main St	
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-06 210 E Main St 33830