

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90023 033 ****61.25

DOCUMENT # F05000004441

1. Entity Name
ABWE FOUNDATION, INC.



Principal Place of Business
**522 LEWISBERRY RD.
NEW CUMBERLAND, PA 17070**

Mailing Address
**522 LEWISBERRY RD.
NEW CUMBERLAND, PA 17070**

50009592



02062006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-2913381

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TORO, DAVID
3009 NE 2ND TERRANCE
WILTON MANOR, FL 33334-1054**

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|---|--|
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | P PIERSON, WILLIAM M 133 WHEATLAND ROAD LEWISBERRY, PA 17339 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | V LOFTIS, MICHAEL G 923 OAK HILL RD. LEWISBERRY, PA 17339 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | S MONTGOMERY, REV. GERALD 21 BALFOUR LANE WILLINGBORO, NJ 08046 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | T DAVIS, DONALD F ESQ. 89 BIDDLE ROAD CARLISLE, PA 17013 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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

Donald F. Davis, Treasurer

4/3/06

717 703-3439

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #