2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000003117

Entity Name: THE DUSTIN E. KISH MEMORIAL FOUNDATION, INC.

FILED Apr 18, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
7990 BAYMEADOW RD 1708				7990 BAYMEADOWS RD EAST 1708			
JACKSONVILLE, FL 32256				JACKSONVILLE, FL 32256 New Mailing Address:			
Current Mailing Address:				New Maining Address.			
#242	DGES BLVD (ILLE, FL 3222	4					
				mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
KISH, RICHARD J 7990 BAYMEADOWS RD E #1708 JACKSONVILLE, FL 32256 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.							
SIGNATUR							
	Electronic	Signature of Registered Agent	İ			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	T () [KISH, RICHARD 3366 VICEROY I JACKSONVILLE,	DR. N.		Title: Name: Address: City-St-Zip:	KISH, RICHAR	ADOWS ROAD EAST UNIT	1708
Title: Name: Address: City-St-Zip:	T () [KISH, ROSE MAI 3366 VICEROY [JACKSONVILLE,	DR. N.		Title: Name: Address: City-St-Zip:	KISH, ROSE N	ADOWS ROAD EAST UNIT	1708
Title: Name: Address: City-St-Zip:	KISH, MELISSA	TON LAKES DR., #2201		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I PEREZ, EMESTO 3360 S. PICKWI JACKSONVILLE,	CK DR.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I HOVIS, JERRY S 11075 RIVER CF JACKSONVILLE,	REEK DR. E.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () [RIGDON, JAMES 12021 ARBOR L JACKSONVILLE,	AKES DR.		Title: Name: Address: City-St-Zip:	() Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: RICHARD J. KISH MR. 04/18/2003