

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 05, 2005
Secretary of State**

DOCUMENT# N01000008035

Entity Name: JO ANN AND RICHARD BEIGHTOL FOUNDATION, INC.

Current Principal Place of Business:

4731 BONITA BAY BLVD #302
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

4731 BONITA BAY BLVD #302
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 36-4481606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEIGHTOL, RICHARD E
4731 BONITA BAY BLVD #302
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: TP () Delete
Name: BEIGHTOL, RICHARD E
Address: 4731 BONITA BAY BLVD #302
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPS () Delete
Name: BEIGHTOL, JO ANN
Address: 4731 BONITA BAY BLVD #302
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: BEIGHTOL, SCOTT C
Address: 310 E BIRCH
City-St-Zip: WHITEFISH BAY, WI 53217

Title: D () Delete
Name: BEIGHTOL, MICHAEL H
Address: 414 CONCORD LN
City-St-Zip: N BARRINGTON, IL 60010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 E BEIGHTOL

PRES

01/05/2005

Electronic Signature of Signing Officer or Director

_____ Date