

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004232

FILED  
Jan 24, 2011  
Secretary of State

**Entity Name:** THE RICH MATTESON FOUNDATION, INC.

**Current Principal Place of Business:**

14274 CRYSTAL COVE DR S.  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 50051  
JACKSONVILLE BEACH, FL 32240

**New Mailing Address:**

**FEI Number:** 38-3681272

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MATTESON, MICHELLE C  
14274 CRYSTAL COVE DRIVE SOUTH  
JACKSONVILLE, FL 32224 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: P  
Name: MATTESON, MICHELLE C  
Address: 14274 CRYSTAL COVE DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D  
Name: FRICANO, SAM  
Address: 3644 FALLON OAKS DR  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D  
Name: MULLIKIN DRASHIN, JACQUE  
Address: 220 N SERENATA DR VILLA 631  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D  
Name: ZENTZ, DON  
Address: 825 LAPOMA WAY  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D  
Name: NICHOLAS, JIM  
Address: 5383 CYPRESS LINKS BLVD  
City-St-Zip: ST. AUGUSTINE, FL 32033

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE C MATTESON

P

01/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date