

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N11000010491

**FILED**  
**Feb 12, 2013**  
**Secretary of State**

**Entity Name:** ROBERT COLSTON MEMORIAL FUND, INC.

**Current Principal Place of Business:**

1858 SUNRISE BOULEVARD  
CLEARWATER, FL 33760

**New Principal Place of Business:**

**Current Mailing Address:**

1858 SUNRISE BOULEVARD  
CLEARWATER, FL 33760

**New Mailing Address:**

**FEI Number:** 45-3769912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHN, ALAN B  
GREENSPOON MARDER, P.A.  
100 W CYPRESS CREEK ROAD, SUITE 700  
FORT LAUDERDALE, FL 33309 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:** ALAN B. COHN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** COLSTON, RICHARD BRENT JR.  
**Address:** 6678 NW 70TH PLACE  
**City-St-Zip:** PARKLAND, FL 33067

**Title:** D  
**Name:** COLSTON, LUCY DANE  
**Address:** 6678 NW 70TH PLACE  
**City-St-Zip:** PARKLAND, FL 33067

**Title:** D  
**Name:** COLSTON, ELIZABETH  
**Address:** 1858 SUNRISE BOULEVARD  
**City-St-Zip:** CLEARWATER, FL 33760

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:** LUCY DANE COLSTON

D

02/12/2013

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

\_\_\_\_\_  
Date