

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N27053** (0)

1. Corporation Name

**RICHARDSON SCHOLARSHIP FOUNDATION, INC.**



Principal Place of Business

Mailing Address

**1626 90TH AVE  
P.O. BOX 339  
VERO BCH. FL 32961-7339**

**1626 90TH AVE  
P.O. BOX 339  
VERO BCH. FL 32961-7339**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PEREZ, T. RENE  
1626 90TH AVENUE  
VERO BEACH FL 32962**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE  
NAME **RICHARDSON, DANFORTH K.**  
STREET ADDRESS **1855 28TH AVENUE**  
CITY-ST-ZIP **VERO BEACH FL**

1.1 TITLE **DIRECTOR** ☐ Change ☒ Addition  
1.2 NAME **JOHN M. LUTHER**  
1.3 STREET ADDRESS **555 - A1A Highway**  
1.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **DVP** ☐ DELETE  
NAME **KAHLE, SANDRA R.**  
STREET ADDRESS **6020 S.W. 5TH STREET**  
CITY-ST-ZIP **VERO BEACH FL**

2.1 TITLE **DIRECTOR** ☐ Change ☒ Addition  
2.2 NAME **CARTER W. HOPKINS**  
2.3 STREET ADDRESS **1580 Gracewood Lane**  
2.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **DAS** ☐ DELETE  
NAME **LUTHER, NANCY R.**  
STREET ADDRESS **555 SOUTH A1A**  
CITY-ST-ZIP **VERO BEACH FL**

3.1 TITLE **DIRECTOR** ☐ Change ☒ Addition  
3.2 NAME **ROY H. LAMBERT**  
3.3 STREET ADDRESS **990 SANDFLY LANE**  
3.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **DAT** ☐ DELETE  
NAME **HOPKINS, SUSAN R.**  
STREET ADDRESS **265 RIVERWAY DR**  
CITY-ST-ZIP **VERO BCH. FL**

4.1 TITLE **DIRECTOR** ☐ Change ☒ Addition  
4.2 NAME **CHARLES J. BRADSHAW**  
4.3 STREET ADDRESS **500 Azalea Lane**  
4.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **DST** ☐ DELETE  
NAME **PEREZ, TOMAS RENE**  
STREET ADDRESS **2019 CORTEZ AVE**  
CITY-ST-ZIP **VERO BCH. FL**

5.1 TITLE **DIRECTOR** ☐ Change ☒ Addition  
5.2 NAME **SAMUEL A. BLOCK**  
5.3 STREET ADDRESS **2127 - 10th Avenue**  
5.4 CITY-ST-ZIP **Vero Beach, FL 32960**

TITLE **D** ☐ DELETE  
NAME **KAHLE, GEORGE A.**  
STREET ADDRESS **6020 SW 5TH ST.**  
CITY-ST-ZIP **VERO BCH. FL**

6.1 TITLE **DAT** ☒ Change ☐ Addition  
6.2 NAME **SUSAN R. HOPKINS**  
6.3 STREET ADDRESS **1580 GRACEWOOD LANE**  
6.4 CITY-ST-ZIP **VERO BEACH, FL 32963**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **DANFORTH K. RICHARDSON, Pres.** April 19, 1996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407-567-1151-Ext.

CR2E037 (12/95)