2004 NOT-FOR-PROFIT CORPORATION

Apr 29, 2004 8:00 am Secretary of State **ANNUAL REPORT (AR)** DOCUMENT # N27053 1. Entity Name 04-29-2004 90217 013 ****61.25 RICHARDSON SCHOLARSHIP FOUNDATION, INC. Principal Place of Business Mailing Address 1626 90TH AVE 1626 90TH AVE 94070006 P.O. BOX 339 VERO BCH. FL 32961-7339 P.O. BOX 339 VERO BCH. FL 32961-7339 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc MOORE CR2E037 (11/03) City & State Applied For City & State 4. FEI Number 65-0064113 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREZ, T. RENE Street Address (P.O. Box Number is Not Acceptable) **1626 90TH AVENUE** VERO BEACH FL 32962 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE . Change XX Addition DIRECTOR RICHARDSON, DANFORTH K. NAME NAME LUTHER, JOHN M. 1855 28TH AVENUE STREET ADDRESS STREET ADDRESS 555 South AlA VERO BEACH FL 32960 CITY-ST-ZIP CITY-ST-ZIP Vero Beach, FL. 32963 ☐ Change XX Addition TITLE ☐ Delete TITLE DIRECTOR KAHLE, SANDRA R. HOPKINSTCARTERING NAME NAME 6020 S.W. 5TH STREET STREET ADDRESS STREET ADDRESS 1580 GRACEWOOD LANE VERO BEACH FL 32968 CITY - ST - ZIP CITY-ST-7IP Vero Beach, FL 32963 DAS TITLE TITLE ☐ Change ☐ Delete ☐ Addition LUTHER, NANCY R. NAME NAME 555 SOUTH A1A STREET ADDRESS STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition HOPKINS, SUSAN R. NAME NAME 1580 GRACEWOOD LN. STREET ADDRESS STREET ADDRESS VERO BCH. FL 32963 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition TITLE PEREZ, TOMAS RENE NAME NAME 2019 CORTEZ AVE STREET ADDRESS STREET ADDRESS VERO BCH, FL 32960 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition KAHLE, GEORGE A.

12. I hereby certify that the information supplied with this filing does not qualify 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 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 his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-7IP

NAME

SIGNATURE:

6020 SW 5TH ST.

VERO BCH, FL 32968

NAME

STREET ADDRESS

CITY-ST-ZIP

April 6, 2004

FILED