FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
95 JAN 23 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N92000000745 (1)

1. Corporation Name

THE LAURA RIDING JACKSON HOME PRESERVATION FOUNDATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1327 N CENTRAL AVE SEBASTIAN FL 32958	1327 N CENTRAL AVE SEBASTIAN FL 32958

3. Date Incorporated or Qualified: 12/10/1992
3a. Date of Last Report: 03/17/1994
4. FEI Number: 59-3160354 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / Zip (24) / Country (25)

2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / Zip (29) / Country (30)

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

VAN DE VOORDE, RENE G
1327 N CENTRAL AVE
SEBBASTIAN FL 32958

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☒ Addition P
NAME	TERRY, CHARLOTTE	1.2 NAME	ERIC SMITH
STREET ADDRESS	5070 N. A1A	1.3 STREET ADDRESS	3320 25th St SW
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	VERO Beach, FL 32960
TITLE	DS	2.1 TITLE	☐ Change ☒ Addition Peter ~~Moore~~ (D)
NAME	VAN DE VOORDE, RENE G	2.2 NAME	PETER MOOR
STREET ADDRESS	1327 N CENTRAL AVE	2.3 STREET ADDRESS	536 BANYAN RD
CITY-ST-ZIP	SEBASTIAN FL 32958	2.4 CITY-ST-ZIP	VERO BEACH, FL 32960
TITLE	DT	3.1 TITLE	☐ Change ☐ Addition
NAME	MOHLER, STEVEN	3.2 NAME	
STREET ADDRESS	1708 21ST STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32960	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	ANGELL, LISA	4.2 NAME	
STREET ADDRESS	765 DAHLIA AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH. FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	BOWMAN, MARGARET	5.2 NAME	
STREET ADDRESS	9420 - 52 CT.	5.3 STREET ADDRESS	
CITY-ST-ZIP	WABASSO FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	JONES, ELLIOTT	6.2 NAME	
STREET ADDRESS	480 - 10TH AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	6.4 CITY-ST-ZIP	

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)(i), 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: Rene' G. VanDeVoorde 1/13/95 407-589-4353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Rene G. VANDeVOORDE, Sec/Dir

0004880