

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90019 013 ****61.25

DOCUMENT # N92000000745

1. Entity Name
LAURA (RIDING) JACKSON FOUNDATION, INC.



Principal Place of Business
1327 N CENTRAL AVE
SEBASTIAN, FL 32958

Mailing Address
1327 N CENTRAL AVE
SEBASTIAN, FL 32958

24048988



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03162004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3160354

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

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)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **ID** ☒ Delete
NAME **JAEKES, LEE**
STREET ADDRESS **955 ISLAND CLUB PLACE**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **P/D** ☐ Change ☒ Addition
NAME **TERRY, CHARLOTTE**
STREET ADDRESS **940 SAND FLY LANE**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **PSD** ☐ Delete
NAME **VAN DE VOORDE, RENE G**
STREET ADDRESS **1327 N CENTRAL AVE**
CITY-ST-ZIP **SEBASTIAN, FL 32958**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **LOWE, TOM**
STREET ADDRESS **9115 44TH AVE**
CITY-ST-ZIP **SEBASTIAN, FL 32958**

TITLE **D** ☐ Change ☒ Addition
NAME **RYALL, CHRISTINE**
STREET ADDRESS **720 CANOE TRAIL**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **D** ☒ Delete
NAME **LARKIN, LYNNE**
STREET ADDRESS **831 CAMELIA LANE**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **D** ☐ Change ☒ Addition
NAME **GORDON, NANCY**
STREET ADDRESS **679 AIA**
CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE **D** ☐ Delete
NAME **BOWMAN, MARGARET**
STREET ADDRESS **9420 - 52 CT.**
CITY-ST-ZIP **WABASSO, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **DeRoche, Celeste**
STREET ADDRESS **280 5TH CIRCLE**
CITY-ST-ZIP **VERO BEACH, FL 32968**

TITLE **D** ☐ Delete
NAME **BLOSSOM, LAUREL**
STREET ADDRESS **920 PARK AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10028**

TITLE **D** ☐ Change ☒ Addition
NAME **SMITH, GREG**
STREET ADDRESS **3220 25TH ST SW**
CITY-ST-ZIP **VERO BEACH, FL 32968**

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 this 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.

SIGNATURE: *Rene G. Van De Voorde*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/04
Date

772-589-4353
Daytime Phone #