

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003503

FILED
Jan 21, 2005
Secretary of State

Entity Name: THE RISCIGNO FAMILY FOUNDATION, INC.

Current Principal Place of Business:

442 W. KENNEDY BLVD., #340
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

442 W. KENNEDY BLVD., #340
TAMPA, FL 33606

New Mailing Address:

FEI Number: 59-3315207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIEF, FRANK III
442 W. KENNEDY BLVD., #340
TAMPA, FL 33606 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: RISCIGNO, JAMES A
Address: 2120 E. RANDOLPH CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: T () Delete
Name: RISCIGNO, VIRGINIA A
Address: 2120 E. RANDOLPH CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: T () Delete
Name: DUVA, CHARLES D
Address: 3000 N. ATLANTIC FLOOR 11, ALIKI TOWER
City-St-Zip: DAYTONA BEACH, FL 32118

Title: T () Delete
Name: RISCIGNO, NICHOLAS V
Address: 8961 S.W. 196 DRIVE
City-St-Zip: MIAMI, FL 33157

Title: T () Delete
Name: RISCIGNO, JEFFREY C
Address: 334 HAYDEN RD
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RISCIGNO, JAMES A
Address: 3607 DONEGAL DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: V (X) Change () Addition
Name: RISCIGNO, VIRGINIA A
Address: 3607 DONEGAL DR
City-St-Zip: TALLAHASSEE, FL 32309

Title: T (X) Change () Addition
Name: DUVA, CHARLES D
Address: 1530 CONERSTONE BLVD # 200
City-St-Zip: DAYTONA BEACH, FL 32117

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JAMES A RISCIGNO

P

01/21/2005

Electronic Signature of Signing Officer or Director

Date