

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90064 025 ****61.25

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1. Entity Name

RUSKIN COMMUNITY DEVELOPMENT FOUNDATION, INC.



Principal Place of Business

315 S TAMiami TR
RUSKIN FL 33570
US

Mailing Address

1203 1ST STREET SW
RUSKIN FL 33570

60064070



1st MOORE CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0545202

Applied For

Not Applicable

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

HUDSON, KATHLEEN R.
1426 DEIRDRE DR
RUSKIN FL 33570

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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

TITLE PD ☐ Delete
NAME CLARK, WADE
STREET ADDRESS 1426 DIERDRE DR
CITY-ST-ZIP RUSKIN FL 33570

TITLE VPD ☐ Delete
NAME MARTIN, DENNIS
STREET ADDRESS 508 3RD AVE SE
CITY-ST-ZIP RUSKIN FL 33570

TITLE DST ☐ Delete
NAME COUNCIL, SANDRA R
STREET ADDRESS 1203 1ST STREET SW
CITY-ST-ZIP RUSKIN FL 33570

TITLE D ☐ Delete
NAME ELLSBERRI, VICKI
STREET ADDRESS 2836 24TH STREET SE
CITY-ST-ZIP RUSKIN FL 33570

TITLE D ☐ Delete
NAME FUENTES, MIGUEL
STREET ADDRESS 416 US 41 SO.
CITY-ST-ZIP RUSKIN FL 33570

TITLE D ☒ Delete
NAME RIDDLE, CHARLES
STREET ADDRESS 2040 SAFFOLD PARK DR
CITY-ST-ZIP RUSKIN FL 33570

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition
NAME Director / Treasurer
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☒ Change ☒ Addition
NAME Secretary / Director
STREET ADDRESS Mariella Smith
CITY-ST-ZIP 108 Janie St.
Ruskin, FL 33570

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:

Sandra R. Council, Sec.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-10-05

813-645-7710

Date

Daytime Phone #