

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2004 08:00 AM
Secretary of State

DOCUMENT # N94000006049	
1. Entity Name THE HEIN AND BEVERLY RUSEN FAMILY FOUNDATION, INC.	

Principal Place of Business 25 SOUTH WASHINGTON DR SARASOTA FL 34236	Mailing Address 25 SOUTH WASHINGTON DR. SARASOTA FL 34236
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent WEBB, CHARLES W 2172 HILLVIEW ST SARASOTA FL 34239
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4. FEI Number 65-0538766	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
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
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FILE NOW: 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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	NAME RUSEN, HEIN ☐ Delete	TITLE	☐ Change ☐ Add
STREET ADDRESS 25 SOUTH WASHINGTON DR	CITY - ST - ZIP SARASOTA FL 34236	NAME	STREET ADDRESS
TITLE DS	NAME RUSEN, BEVERLY ☐ Delete	TITLE	☐ Change ☐ Add
STREET ADDRESS 25 SOUTH WASHINGTON DR	CITY - ST - ZIP SARASOTA FL 34236	NAME	STREET ADDRESS
TITLE D	NAME SANCHEZ, ANGELA Y ☐ Delete	TITLE	☐ Change ☐ Add
STREET ADDRESS 1958 REGENTS WAY	CITY - ST - ZIP MARIETTA GA 30062	NAME	STREET ADDRESS
TITLE D	NAME TAUBER, MONIQUE ☐ Delete	TITLE	☐ Change ☐ Add
STREET ADDRESS 64367 MUEHLTAL	CITY - ST - ZIP WASCHENBACH GERMAN Y	NAME	STREET ADDRESS
TITLE	NAME ☐ Delete	TITLE	☐ Change ☐ Add
STREET ADDRESS	CITY - ST - ZIP	NAME	STREET ADDRESS
TITLE	NAME ☐ Delete	TITLE	☐ Change ☐ Add
STREET ADDRESS	CITY - ST - ZIP	NAME	STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEIN RUSEN, PRES. 1/21/04 (941)388-1191