FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N95000005418 (7)

FILED Apr 06 1998 8:00am Secretary of State

THE RYBNIKOV FOUNDATION, INC.									
Principal Place	e of Busines	68	Mailing Addre	Mailing Address					
102 WOODLAN OSPREY FL 34			P O BOX 668 OSPREY FL 34	P O BOX 668 OSPREY FL 34229				3. Date Incorporated or Qualified 11/14/1995 4. FEI Number Applied For Not Applicable	
2. Principal Pi	lace of Busi	ness	2a. Mailing Ad	2a. Mailing Address				- 60 7E	
21			26	A = 1.				5. Certificate of Status Desired	
Suite, Apt.	#, etc.		—	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be	
22 City & State			City & State	City & State				Trust Fund Contribution Added to Fees	
23			_	28				7. Is this nonprofit corporation a homeowners association? Yes \text{No}	
Zip	Zip Country		Zip	Cour		у		8. This corporation owes or has paid the current year intangible	
24	25		29	30		· •		Personal Property Tax due June 30. Yes No	
9, Name and Address of Current Registered Agent						1 5		10. Name and Address of New Registered Agent	
					81	L	ame		
	L, GERALE ODLAND F						treet Addres	ss (P.O. Box Number is Not Acceptable)	
	/ FL 34229			ľ			-		
001121	I L VILLE			200			•		
					84	ין יי	ity	FL 85 Zip Code	
11. Pursuant to office or reagent. I as	Pursuant to the provisions of Sections 617.0502 and 617.1508, 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, it am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
SIGNATURE _	Sinnelius hone	for printed name of registers	d soon) and tills if analysable	ALCOTE:	- Dunistavad An	ام متم) when reinslating) DATE	
12.	Signature, typed or printed name of registered agent and title if applicable. (NOT OFFICERS AND DIRECTORS					100 X B1	Gulatore reduser	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP			DELETE	1.1 TITLE			Change Addition	
NAME	11101111101111001				1.2 NAME				
STREET ADDRESS BOLSHOY RJEVSKY PEREVLO CITY-ST-ZIP MOSCOW, RUSSIA 121069					1.3 STREET ADDRESS		ress		
CITY-ST-ZIP			Dr. err	1.4 CITY-ST-ZIP		P			
TITLE NAME	VTD	I OFOM D.E.	L	DELETE	2.1 TITLE			☐ Change ☐ Addition	
STREET ADDRESS		ll, gerald f Xodland Pl			2.2 NAME 2.3 STREET	t ann	DECC.		
CITY-ST-ZIP OSPREY FL 34229				2.4 CITY-ST					
TITLE	D O			DELETE 3.1 TITL		01-L	H	☐ Change ☐ Addition	
NAME	KUTTLER, CARL			3.2 NAM			-		
STREET ADDRESS 8580 66TH ST. NORTH					3.3 STREET ADDRESS		AESS		
CITY-ST-ZIP	PINELL	<u>as park fl 3408!</u>		3.4. CITY - ST- ZIP		IP			
TITLE				DELETE	4.1 TITLE		- 1	Change Addition	
HAME DOYLE, ESQ., JAMES F					4. 2 NAME				
STREET ADDRESS 6 LEESBURG CT					4.3 STREET ADDRESS				
CITY-ST-ZIP				DELETE	4.4 CITY - ST - ZIP		Р	Change Addition	
TITLE			U	OLLETE	5.1 TITLE 5.2 NAME			Change Addition	
STREET ADDRESS					5.2 NAME 5.3 STREET	T ANN	acee		
CITY-ST-7IP					S.A CITY - G		- 1		

CITY-ST-ZIP 14. 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 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 of 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 appear of the corporation of the corpora

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

483-3102