

2000 UNIFORM BUSINESS REPORT-(UBR)

2/2/

FILED

May 02, 2000 8:00 am
Secretary of State

02-02-2000 90047 006 ****61.25

DOCUMENT # N97000003026

1. Entity Name

THE W.W. RICHARDSON FAMILY FOUNDATION, INC.

Principal Place of Business

7457 CYPRESS BEND MANOR
VERO BEACH FL 32966

Mailing Address

7457 CYPRESS BEND MANOR
VERO BEACH FL 32966-5172

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0813666

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RICHARDSON, WILLIAM W
7457 CYPRESS BEND MANOR
VERO BEACH FL 32966

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	RICHARDSON, WILLIAM W	
STREET ADDRESS	7457 CYPRESS BEND MANOR	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	RICHARDSON, WILLIAM H	
STREET ADDRESS	7457 CYPRESS BEND MANOR	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	RICHARDSON, CONRADINA C	
STREET ADDRESS	7457 CYPRESS BEND MANOR	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	RICHARDSON, DAVID C	
STREET ADDRESS	7457 CYPRESS BEND MANOR	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	<input type="checkbox"/> Delete
NAME	RICHARDSON, KATHERINE E	
STREET ADDRESS	7457 CYPRESS BEND MANOR	
CITY-ST-ZIP	VERO BEACH FL 32966	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

SIGNATURE REQUIRED Richardson 1/21/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CH2E037 (9/99)