

**2003 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N98000001142

1. Entity Name
THE SADAKO K. JUDD PRIVATE FOUNDATION, INC.



Principal Place of Business

2130-A ANDREA LANE
FORT MYERS, FL 33912

Mailing Address

2130-A ANDREA LANE
FORT MYERS, FL 33912



03062006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0816375

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAWTON, ROBERT J
2130-A ANDREA LANE
FORT MYERS, FL 33912

**DO NOT WRITE
IN THIS SPACE**

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LAWTON, ROBERT J
STREET ADDRESS	2130-A ANDREA LANE
CITY - ST - ZIP	FORT MYERS, FL 33912
TITLE	D
NAME	LAWTON, MATTHEW J
STREET ADDRESS	350 COCOHATCHEE DRIVE
CITY - ST - ZIP	NAPLES, FL 34110
TITLE	D
NAME	MEYERS, SARA L
STREET ADDRESS	5134 SOUTH OSCEOLA STREET
CITY - ST - ZIP	LITTLETON, CO 80923
TITLE	D
NAME	COLLINS, ELIZABETH L
STREET ADDRESS	11812 SE 228TH PLACE
CITY - ST - ZIP	KENT, WA 98031
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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04/08/06 80001-020 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Robert J. Lawton Robert J. Lawton

3/21/06

239-433-3325

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #