

FILED
Jul 21, 2008 8:00 am
Secretary of State

40111004

DOCUMENT # N98000005867						07-21-2008 90028 035 *****61.25	
1. Entity Name THE BECHTOLT PRIVATE FAMILY FOUNDATION, INC.							
Principal Place of Business 20818 DESERT SANDS DRIVE SUN CITY WEST, AZ 85375-5442				Mailing Address 20818 DESERT SANDS DRIVE SUN CITY WEST, AZ 85375-5442			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		4. FEI Number 86-0939356			
Zip		Country		5. Certificate of Status Desired ☐		Applied For ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
FOX, CHRISTINE FL INCOPORATING & REGSTRD AGTS. 127 W HILLCREST ST. ALTAMONTE SPRINGS, FL 32714				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				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 _____				DATE _____			
Filing Fee Is \$61.25 Due by September 12, 2008				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				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PTD	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	BECHTOLT, RICHARD L			NAME			
STREET ADDRESS	20818 DESERT SANDS DR.			STREET ADDRESS			
CITY - ST - ZIP	SUN CITY W., AZ 85375			CITY - ST - ZIP			
TITLE	VPD	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	BECHTOLT, NANCY C			NAME			
STREET ADDRESS	20818 DESERT SANDS DR.			STREET ADDRESS			
CITY - ST - ZIP	SUN CITY W., AZ 85375			CITY - ST - ZIP			
TITLE	SD	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	STAPENHORST, HELEN B			NAME			
STREET ADDRESS	442 THERESA LANE			STREET ADDRESS			
CITY - ST - ZIP	SIERRA MADRE, CA 91024			CITY - ST - ZIP			
TITLE	D	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	BECHTOLT, RICHARD L JR			NAME			
STREET ADDRESS	S 1506 RIEGAL			STREET ADDRESS			
CITY - ST - ZIP	SPOKANE, WA 99212			CITY - ST - ZIP			
TITLE	D	☐ Delete		TITLE	☐ Change ☐ Addition		
NAME	MAGLEY, ELIZABETH B			NAME			
STREET ADDRESS	7135 REYNOLDS			STREET ADDRESS			
CITY - ST - ZIP	PITTSBURGH, PA 15208			CITY - ST - ZIP			
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition		
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
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 <i>Nancy C. Bechtolt</i> NANCY C BECHTOLT				Date 7/15/08			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone # 623-546-0746			