## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Bandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT #** 

(4)

## **FILED** Mar 10 1998 8:00am Secretary of State

Corporation Name					
RUSTER FOUNDATION INC.					
110012	IN TOURDATION ING.			1 10011001 200 11711 00101 11001 11001 1001	I BODIA BOBIÁ BOBIA BOBIO BERNI 1841
					: Bib): Bibi: Bibi: Bibi: Bibi: Bibi:
Principal Place	e of Business	Mailing Address		- i indiindi saa iliik adlas ilibdi sidal abii fisal	I BIRIT BIRIT BIRIT BIRIT BIRIT TORI
903-C & D N. CLAY \$T. P. O. BOX 686				3. Date Incorporated or Qualified	
0-8-D-		<del>-0 8 0 -</del> -			
STURGIS MI 49	<b>109</b> 1	STURGIS MI 49091		07/05/1990 4. FEI Number	I I Annie de Pro
ŲS		US			Applied For
2. Principal P	lace of Business	2a. Mailing Address		38-2491795	Not Applicable
21	idde di businessi	26 P. O. BOX C	6,26	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeow	ners association?
23		28 STURGIS	//!!	☐ Yes	X No
Zip	Country	Zip	Country	8. This corporation owes or has pald the	
24	25		30 US	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
81 Name					
				ess (P.O. Box Number is Not Acceptable)	
110 SOTA DRIVE			83		
EDANIATORE OLOB					
JUPITER	R FL 33458		84 City		85 Zip Code
11. 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and little # applicable (NOTE: Registered Agent eignature required when reinstating)  DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	QUADE, HERB		1.2 NAME		ľ
STREET ADDRESS	260 BRITAIN		1.3 STREET ADDRESS		
CITY-ST-ZIP	BENTON HARBOR MI		1.4 CITY - ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	JEVERT, ART		2.2 NAME		
STREET ADDRESS	7502 WOODBRIDGE LANE		2.3 STREET ADDRESS		
CITY-ST-ZIP	PORTAGE MI		2. 4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	3.1 TITLE		Change Addition
NAME	Soisson, Dick		3.2 NAME		
STREET ADDRESS	3923 PONTIAC AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	KALAMAZOO MI		3.4. CITY-ST-ZIP		
TITLE	VPD	DELETE	4.1 TITLE		Change Addition
NAME	HUNSBERGER, GORDON		4. 2 NAME		
STREET ADDRESS	1643 DIAMOND COURT N.E.		4.3 STREET ADDRESS		
CITY-ST-ZIP	GRAND RAPIDS MI		4.4 CITY - ST - ZIP		
TITLE	SD	☐ DELETÉ	5.1 TITLE		☐ Change ☐ Addition
NAME	LEINARR, KAREN S		5.2 NAME		
STREET ADDRESS	10380 BARFIELD RD		5.3 STREET ADDRESS		
CITY-ST-ZIP	DOWLING MI	T Dri rye	5.4 CITY-ST-ZIP		Change Laddelan
TITLE	D SOOTED AND	☐ DELETE	6.1 TITLE		Change Addition
NAME	FOSTER, MIKE		6.2 NAME		
STREET ADDRESS	8171 LAKE VISTA		6.3 STREET ADDRESS		
CITY-ST-ZIP	RICHLAND MI	h this filing does not mustiful for	6.4 City-St-ZiP	Section 119 07/2Vi) Florida Statutos 14 miles	continue that the Information
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 or 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 all achment with an elders.					

Herbert J. Quade, President

3/3/98

## NAMES AND ADDRESSES OF EACH OFFICER AND DIRECTOR (continued)

D Lake, Jo 313 Moross, Grosse Pointe, MI 48236

D McShannock, Daniel J. 4709 Pinewood Dr., Midland, MI 48640

D Lunsford, Robert 988 Symmes Rd., Fairfield, OH 45014

D Compton, Leroy 8520 E. McGregor Rd., Indianapolis, IN 46259

D Greene, Lofton 5720 Argyle, Dearborn, MI 48126

D Redman, Bruce 3075 Pifer Rd., Delton, MI 49046