DOCUMENT # N9900002583 1. Entity Name DCC FOUNDATION, INC.			\mathbf{S}	FILED Feb 08, 2000 8:00 an Secretary of State 02-08-2000 90167 047 ****61.25			
Principal Place of Business	Mailing Address						
1050 PALM BLVD. DUNEDIN FL 34698	1050 PALM BLVD. DUNEDIN FL 34698-2635			F610100U			
2. Principal Place of Business	3. Mailing Address			·= ·=··= ·•··· ==··· ==··· =			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State	City & State		4. FEI Number	9-358558	3	երհեժ Մ ու գրբն	
Zip Country	Zip	Country		f Status Desired	\$8.75 Adv	ditional	
6. Name and Address of Curre	ent Registered Agent		7. Name and A	Address of New Registe			
		Name					
COOPER, FRANCIS L 1050 PALM BLVD. DUNEDIN FL 34698		Street Addre	ss (P.O. Box Number	is Not Acceptable)			
		City			FL Zip Cod	le ·	
SIGNATURESignature, typed or printed name of registered ag	gent and title if applicable. (NOTI	E: Registered Agent signature req	uired when reinstating) 5.00 May Be	<u> </u>	eck Payable to	 	
FEE IS \$61.25 Trust Fund		· · · · · · · · · · · · · · · · · · ·	ided to Fees		nent of State		
10. OFFICERS AND		11.	ADDITIONS/CHA	NGES TO OFFICERS AN			
TITLE DONALD J. HERT NAME STREET ADDRESS 1991 GOFF VIEW AVE	E. JDENI	TITLE NAME STREET ADDRESS			☐ Change	□.	
TITLE FOLKED THE	7678 □ Delete	CITY-ST-ZIP			☐ Change	<u> </u>	
NAME 1255 NELSON ST	VICES	NAME - STREET ADDRESS				~~ <u>~</u> ~	
CITY-ST-ZIP DUNEDIN, F43		CITY-ST-ZIP			☐ Change	<u> </u>	
TITLE FRANCIS L. COSK NAME 2281 Gulf VIEW STREET ADDRESS CITY-ST-ZIP DUNEDON, FL		NAME STREET ADDRESS			Change	L	
TITLE DIRECTER	□ Delete	CITY-ST-ZIP	····	<u></u>	☐ Change		
MAME THE MIKE H. KIRBY	,	NAME			— • • • • • • • • • • • • • • • • • • •	_	
STREET ADDRESS 3327 Spicewood Co	198	STREET ADDRESS CITY-ST-ZIP					
TITLE DIRECTOR NAME KERMITCIRAMEY	☐ Delete	TITLE NAME			☐ Change	□.	
STREET ADDRESS 2/96 DEMALET DA CITY-ST-ZIP DUNEDIN, FL 34	give L98	STREET ADDRESS CITY-ST-ZIP					
TITLE DIRECTOR	Delete	TITLE			☐ Change	□ *.	
NAME DON GOODALL		NIANAC 1					
STREET ADDRESS 2158 GUTVEN B	100. 34698	NAME STREET ADDRESS CITY-ST-ZIP					
	with this filing does not qualify for the rt is true and accurate and that no propered to execute this report	STREET ADDRESS CITY-ST-ZIP The exemption stated in my signature shall have as required by Chapter	he same legal effect	as if made under oath; the same appearance a	nat I am an officer	Block	

Date

Daytime Phone #

SIGNATURE: