2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007
Secretary of State

DOCUMENT# N99000002583

Entity Name: DCC FOUNDATION, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
1050 PALM BLVD. DUNEDIN, FL 34698	

Current Mailing Address:	**New Mailing Address:**
1050 PALM BLVD. DUNEDIN, FL 34698	

FEI Number: 59-3585583 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
COOPER, F.L. 700 MEASE PLAZA SUITE 921 DUNEDIN, FL 34698 US	

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: ______________________________

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:		**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**	
Title:	P ( ) Delete	Title:	( ) Change ( ) Addition
Name:	MITCHELL, ANTHONY	Name:	
Address:	523 BAYWOOD DR. S	Address:	
City-St-Zip:	DUNEDIN, FL 34698	City-St-Zip:	
Title:	T ( ) Delete	Title:	( ) Change ( ) Addition
Name:	WYLDE, JOHN	Name:	
Address:	1512 GLEN HOLLOW LANE NORTH	Address:	
City-St-Zip:	DUNEDIN, FL 34698	City-St-Zip:	
Title:	D ( ) Delete	Title:	( ) Change ( ) Addition
Name:	KURBER, KEITH	Name:	
Address:	1558 ROXBERG LANE	Address:	
City-St-Zip:	DUNEDIN, FL 34698	City-St-Zip:	
Title:	D ( ) Delete	Title:	( ) Change ( ) Addition
Name:	HERTING, DONALD	Name:	
Address:	191 GOLF VIEW DR	Address:	
City-St-Zip:	DUNEDIN, FL 34698	City-St-Zip:	
Title:	S ( ) Delete	Title:	( ) Change ( ) Addition
Name:	HORN, EMILY	Name:	
Address:	1115 NELSON STREET	Address:	
City-St-Zip:	DUNEDIN, FL 34698	City-St-Zip:	
Title:	D ( ) Delete	Title:	( ) Change ( ) Addition
Name:	LILIOTT, WILLIAM	Name:	
Address:	2220 WATROUS DR.	Address:	
City-St-Zip:	DUNEDIN, FL 34698	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN WYLDE T 03/29/2007

Electronic Signature of Signing Officer or Director Date