# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 29, 2004**
**Secretary of State**

DOCUMENT# N99000003094

**Entity Name:** DAPHNE FOUNDATION, INC.

**Current Principal Place of Business:**

1641 BINNEY DR.
FT. PIERCE, FL 34949

**New Principal Place of Business:**

**Current Mailing Address:**

1641 BINNEY DR.
FT. PIERCE, FL 34949

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALLEN, ROBERT B
1641 BINNEY DR.
FT. PIERCE, FL 34949 US

**Name and Address of New Registered Agent:**

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:**

Title: D ( ) Delete
Name: ALLEN, ROBERT B
Address: 1641 BINNEY DR.
City-St-Zip: FT. PIERCE, FL 34949

Title: D ( ) Delete
Name: ALLEN, NANCY
Address: 1641 BINNEY DR.
City-St-Zip: FT. PIERCE, FL 34949

Title: D ( ) Delete
Name: SHIKOH, JANE ALLEN
Address: 1641 BINNEY DR.
City-St-Zip: FT. PIERCE, FL 34949

Title: D ( ) Delete
Name: DEAN, JEFFREY
Address: 227 CINNAMON LAKE CIR.
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete
Name: DEAN, DIANE
Address: 227 CINNAMON LAKE CIR.
City-St-Zip: MELBOURNE, FL 32901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT B. ALLEN D 03/29/2004
Electronic Signature of Signing Officer or Director — Date