

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003094

FILED
Feb 26, 2005
Secretary of State

Entity Name: DAPHNE FOUNDATION, INC.

Current Principal Place of Business:

136 CAVALIER ST
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

136 CAVALIER ST
PALM BAY, FL 32909

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:

ALLEN, ROBERT B
136 CAVALIER ST
PALM BAY, FL 32909 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:

02/26/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALLEN, ROBERT B
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: ALLEN, NANCY
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: SHIKOH, JANE ALLEN
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: DEAN, JEFFREY
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: DEAN, DIANE
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

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

DIR

02/26/2005

Electronic Signature of Signing Officer or Director

Date