2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attack

SIGNATURE:

FILED Jan 26, 2001 8:00 am DOCUMENT # N9900004381 **Secretary of State** 1. Entity Name N.O.D.D. FOUNDATION, INC. 01-26-2001 90027 048 ****70.00 Principal Place of Business Mailing Address 2515 VIA MILANO CT 2515 VIA MILANO CT. MERRITT (SLAND FL-32953 MERRITT ISLAND-FL- 32953 2. Principal Place of Business 3. Mailing Address UCAR Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number 59-3593391 Applicable Zip Zip. Country \$8.75 Additional 5.- Certificate of Status Desired 妅 Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JUILGENSER Street Box Number is Not Acceptable) STANSELL: JOHN H. DR 2515 VIA MILANO COURT -MERRITT ISLAND FL 32953 purpose of changing its registered office or registered agent, or both, in the state of Florida 8. The above named entity submits this statement for the SIGNATURE Signature, typed or printed name of FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. President /Director Addition TITLE Delete TITLE Charley Jongensen STANSELL_JOHN H NAME Pearl 2515 VIA MILANO CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32953 Maco Cocoa, Fl 32926 TITLE Delete TITLE Director ☐ Change Addition Ann Marie Jorsensen 1455 Quince Ave NAME SÜLLIVAN, WILLIAM GHIT NAME 1445 HOLIBAY BLVD STREET ADDRESS STREET ADDRESS Merritt Island, Fl32952 CITY-ST-ZIP MERRITT ISLAND FL-32952 CITY-ST-ZIP Director TITLE TITLE ☐ Change Addition . Delete Robert Hoffman 260 Sabal Ave NAME MCCLANANHAN, L. NAME STREET ADDRESS 670 N COURTENAY PKY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MERRITT ISLAND FL 32953** Merritt Island, Fl 32952 Director TITL F ☐ Delete TITLE ☐ Change Addition Robert Clifton NAME NAME STREET ADDRESS STREET ADDRESS 102 Riverside Dr. €000a, F1 32922 CITY-ST-ZIP CITY-ST-ZIP Director ☐ Delete TITLE Change Addition James Ruckringle NAME 6257 M. U.S. 1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Cocoa Fl TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the Information supplied with the filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the release empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

all other like empowered

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ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TO RGENSEA