2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2004
Secretary of State

DOCUMENT# 745289

Entity Name: THE DOVE FOUNDATION, INC.

Current Principal Place of Business:

7349 ULMERTON RD.
#294
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

7349 ULMERTON RD.
#294
LARGO, FL 33771

New Mailing Address:

FEI Number: 59-1874855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOZAN, EILEEN H.
7349- ULMERTON ROAD
#294
LARGO, FL 33771 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:	VP	( ) Delete
Name:	SAMLASKA, SUSAN	
Address:	5940 PELICAN BAY PLAZA #301	
City-St-Zip:	SAINT PETERSBURG, FL 33707	
Title:	VD	( ) Delete
Name:	BRADY, JANICE E	
Address:	1837 VICEROY LN	
City-St-Zip:	HOLIDAY, FL 34690 US	
Title:	PD	( ) Delete
Name:	KOZAN, EILEEN H	
Address:	7349 ULMERTON RD. #294	
City-St-Zip:	LARGO, FL 33771 US	
Title:	S	(X) Delete
Name:	GRAHAM, PAULININE	
Address:	1349 ULMERTON ROAD #298	
City-St-Zip:	LARGO, FL 33771 US	

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:	

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: EILEEN H. KOZAN PR 03/11/2004

Electronic Signature of Signing Officer or Director — Date