

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 749084

1. Entity Name

DODD FOUNDATION, INC.

**FILED**  
**Mar 11, 2002 8:00 am**  
**Secretary of State**

03-11-2002 90069 050 \*\*\*\*61.25

0070274

Principal Place of Business

3625 MALLIE COURT  
MELBOURNE FL 32934-8358  
US

Mailing Address

3625 MALLIE COURT  
MELBOURNE FL 32934-8358  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1939696

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DODD, W STANLEY JR  
3625 MALLIE COURT  
MELBOURNE FL 32934

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME D  
STREET ADDRESS DODD, W. S JR  
CITY-ST-ZIP 3625 MALLIE COURT  
MELBOURNE FL 32934

TITLE ☒ Change ☐ Addition  
NAME DP  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME STD  
STREET ADDRESS DODD, CAROLYN D.  
CITY-ST-ZIP 3625 MALLIE COURT  
MELBOURNE FL 32934

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS HAYES, ELLEN D  
CITY-ST-ZIP 2574 KINGSMILL AVE.  
MELBOURNE FL 32934

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS DODD, PHILIP H.  
CITY-ST-ZIP 617 KENYON DR  
RED LION PA 17356

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME DP  
STREET ADDRESS HAYES, THOMAS M.  
CITY-ST-ZIP 2574 KINGSMILL AVE  
MELBOURNE FL 32934

TITLE ☒ Change ☐ Addition  
NAME D  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME D  
STREET ADDRESS DODD, WARREN S. III  
CITY-ST-ZIP 2661 PINEAPPLE AVE  
MELBOURNE FL 32935

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W.S. Dodd, Jr. 2-15-02 (321) 259-9830

Date

Daytime Phone #

CR2E037 (9/01)

10.

Title DV

Name Dodd, Mary D.

Street 617 Kenyon Drive  
Address

City-St-Zip Red Lion, PA 17356

420051