2005 NOT-FOR-PROFIT CORPO ANNUAL REPORT (AR) DOCUMENT # 749084 1. Entity Name DODD FOUNDATION, INC.					FILED Mar 17, 2005 08:00 AM Secretary of State		
Principal Place of Business 3625 MALLIE COURT MELBOURNE FL 32934-8358 US		Mailing Address 3625 MALLIE COURT MELBOURNE FL 32934-8358 US			ANANG NANG MANAK ININ ANAN AYAN AYAN AYAN MANTAYAN B	NUTUR NE NEWS	
2. Principal Place of Business		3. Mailing Address Suite, Apt. #, etc.					
				1st MOORE CR2E037 (10/04)			
City & State		City & State	<u>, </u>	4. FEI Number 5	4. FEI Number Applied For 59-1939696 Not Applicable		
Zip	Country	Zip	Country	5. Certificate of St	Fee Require		
362	5. Name and Address of Curre DD, W STANLEY JR 25 MALLIE COURT LBOURNE FL 32934	ur veðisref er viðeur		Street Address (P.O. Box Number is Not Acceptable)			
8. The above the obliga	e named entity submits this statement tions of registered agent.	for the purpose of changing it	City s registered office or regis	stered agent, or both, in	FL Zip Coc the State of Florida. I am familiar with,		
SIGNATURE		ant and title if applicat. Is (NO)	TE. Registered Agent signature requ	ured when reinsteling)	DATE	<u> </u>	
	FILE NOW: FEE IS \$61.25 Due By May 1, 2005		Impaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Payable Florida Department of s	to State	
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS IN	V 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP DODD, W. S JR 3625 MALLIE COURT MELBOURNE FL 32934	Delete	HILE NAME STREET ADDRESS CITY: ST-7IP		🗔 Change	Addition	
TITLE NAME STREET ADDRESS CITY - SY - ZIP	STD DODD, CAROLYN D. 3625 MALLIE COURT MELBOURNE FL 32934	Delele	THE NAME STREET ADDREGS CITY_ST-ZIP	03.	U00000265954 /17/05-80010-024 61.2	Addition	
TITLE NAME STREET ADDRESS GITY - ST - ZIP	D HAYES, ELLEN D 3653 PALOMINO MELBOURNE FL 32934	Delete	TITEF NAME STREET AUDRESS CITY-ST-ZIP		Change	Addition	
TITLE NAME STREET ADDRESS C(TY-ST-ZIP	D HAYES, THOMAS M 3653 PALOMINO MELBOURNE FL 32934		TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DODD, PHILIP H 617 KENYON DRIVE RED LION PA 17356	🗋 Delete	DILE NAME STREET ADDRESS CITY-ST-2IP		Change	Addition	
TITLE NAME STRFET ADDRESS CITY+ST-ZIP	D DODD, WARREN S. III 2661 PINEAPPLE AVE MELBOURNE FL 32935		IITLF NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition	
12. I hereby of indicated of the cor	certify that the information supplied w I on this report or supplemental report poration or the receiver or trustee em	ith this filing does not qualify for is true and accurate and that powered to execute this repor	or the exemption stated in my signature shall have the t as required by Chapter 6	Section 119.07(3)(i), Flo le same legal effect as i 317, Florida Statutes, an	rida Statutes. I further certify that the f made under oath; that I am an officer d that my name appears in Block 10 o	nformation or director r Block 11 if	