

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2001 8:00 am
Secretary of State

02-12-2001 90006 037 *****66.25

DOCUMENT # F93060001790

1. Entity Name

DODSON FAMILY FOUNDATION, INC.

Principal Place of Business

Mailing Address

C/O MRS. ELIZABETH K. DODSON
7383 ORANGWOOD LANE, UNITE 303
BOCA RATON FL 33433

C/O MRS. ELIZABETH K. DODSON
7383 ORANGWOOD LANE, UNITE 303
BOCA RATON FL 33433

813264



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

51-0342321

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DODSON, ELIZABETH K.
7383 ORANGEWOOD LANE
UNIT 303
BOCA RATON FL 33433

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PCD	DODSON, ELIZABETH K	7383 ORANGEWOOD LANE	BOCA RATON FL 33433	<input type="checkbox"/>
VD	KARA, MICHAEL J	7383 ORANGEWOOD LANE	BOCA RATON FL 33433	<input type="checkbox"/>
VD	VINCENT, ISABELLE	172109 FOOT HILL DRIVE	SUN CITY AZ	<input type="checkbox"/>
CPA	MCCURRY, WILLIAM P	21301 POWERLINE RD STE 204	BOCA RATON FL 33433	<input type="checkbox"/>
VD	VINCENT, THEODORE	3838 MANCHESTER AVE	ENCINITAS CA	<input type="checkbox"/>
A	PYE, THOMAS G	2787 E OAKLAND PARK BLVD STE 301	FT LAUDERDALE FL 33306	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Elizabeth K. Dodson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/2001

Date

Daytime Phone #

561-483-6374

CR2E037 (10/00)