2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 28, 2008 08:00 Al **Secretary of State** DOCUMENT # N01000000028 THE DANNEN FOUNDATION, INC. Principal Place of Business Mailing Address 5566 BROOKLINE DRIVE 5566 BROOKLINE DRIVE ORLANDO, FL 32819 ORLANDO, FL 32819 03202008 No Chg-NP CR2E037 (4/06) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3727057 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE DANNEN, DOUGLAS 5566 BROOKLINE DRIVE ORLANDO, FL 32819 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little if applicable (NOTE, Registered Agent signature required when reinstating) DATE U000000874064 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be 10708-80104-008 61.25 Trust Fund Contribution. Due by May 1, 2008 10. OFFICERS AND DIRECTORS TITLE NAME DANNEN, CAROLYN STREET ADDRESS 5566 BROOKLINE DRIVE CITY-ST-ZIP ORLANDO, FL 32819 TITLE DANNEN, DOUGLAS STREET ADDRESS 5566 BROOKLINE DRIVE CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 of 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 all other like empowered.

SIGNATURE:

CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED