

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007327

FILED
Jul 24, 2003
Secretary of State

Entity Name: DUNAMIS FOUNDATION, INC.

Current Principal Place of Business:

345 SWANSEA CT
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

PO BOX 620400
OVIEDO, FL 327620400

New Mailing Address:

FEI Number: 30-0001787

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ARATA, JOY E
345 SWANSEA CT
OVIEDO, FL 32765

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: D () Delete
Name: D'ARATA, JOY E
Address: 345 SWANSEA CT
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: D'ARATA, RICHARD E
Address: 345 SWANSEA CT
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: HAGGAI, JOHN E
Address: 550 RIPPLING WATER LN
City-St-Zip: DULUTH, GA 30097

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: D'ARATA, JOY E
Address: 345 SWANSEA CT
City-St-Zip: OVIEDO, FL 32765

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: JOY E. D'ARATA

D

07/24/2003

Electronic Signature of Signing Officer or Director

Date