

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 8:00 am**  
**Secretary of State**

01-29-2007 90082 045 \*\*\*\*61.25

**DOCUMENT # N03000003802**

1. Entity Name

**THE ANDREW S. RODDICK FOUNDATION, INC.**



Principal Place of Business

5458 TOWN CENTER ROAD  
#13  
BOCA RATON, FL 33486

Mailing Address

140 SHERMANS MILL DR  
INGRAM, TX 78025

**DO NOT WRITE IN THIS SPACE**



01172007 No Chg-NP

CR2E037 (4/06)

4. FEI Number

20-0014500

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MULLIN, JAMES  
500 NE 5TH AVE -- --  
#2B  
DELRAY BEACH, FL 33483

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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	RODDICK, ANDREW S
STREET ADDRESS	140 SHERMANS MILL DR
CITY- ST- ZIP	INGRAM, TX 78025
TITLE	VT
NAME	RODDICK, JERRY
STREET ADDRESS	140 SHERMANS MILL DR
CITY- ST- ZIP	INGRAM, TX 78025
TITLE	S
NAME	RODDICK, BLANCHE
STREET ADDRESS	140 SHERMANS MILL DR
CITY- ST- ZIP	INGRAM, TX 78025
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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:**

*Blanche Roddick Chair*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #