## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N04000004704



Pinning Place of Business   No P.O. Box #   2. Making Address   2. Pinning Place of Business   No P.O. Box #   3. Making Address   2. Pinning Place of Business   No P.O. Box #   3. Making Address   2. Pinning Place of Business   No P.O. Box #   3. Making Address   2. Pinning Place of Business   No P.O. Box #   3. Making Address   2. Pinning Place   3. Making Address   2. Pinning Place   3. Making Address   3. Making Addr	1. Entity Nam DOROTH FOUNDA	IY FAISO	N BEARD SCHOL	.ARSHIP				)3-12-2007 9	0369 02	2/ ******61	23
Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   Suite, Apt. 4, etc.   D3052007 Chg-Np CR2E037 (12/06)   Cry & State   Cry & State   A. FEI Number   NOT APPILCABLE   Applied for   Not Applicable   Set. Additional	12551 N.E.	25TH AVENU		12551 N.E. 25TH A\			_				
Cay & State	2. Principal P	Place of Busin	ess - No P.O. Box #	3. Mailing Address							
Not Applicable   Not Applicable   Not Applicable   Not Applicable   Service   Servic	Suite, Apt. #, etc. S			Suite, Apt. #, etc.	Suite, Apt. #, etc.			03052007 Chg-NP CR2E037 (12/06)			
S. Certification of Status Desired   Foe Required	City & Stat	te		City & State				LICABLE		<u> </u>	·
Name	Zip				Country		<u> </u>			Fee Require	
BEARD, TERRELL 12551 N.E. 25TH AVENUE ANTHONY, FL 32617  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 tamiliar with, and accept the displacement of prevent agent.  SIGNATURE    Fliling Fee is \$61.25   Due by May 1, 2007   Pue by Ma		6. Name	and Address of Current	Registered Agent	Nam	ne	7. Name and Ad	idress of New R	egistered	Agent	
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 lamiliar with, and accept the obligations of registered agent.  SIGNATURE    Signature   The profile is \$81.25   Trust Fund Contribution.   Signature improve when entailing   DATE	12551 N.E	. 25TH AV					(P.O. Box Number i	s Not Acceptable	<del>)</del>		
8. The above named onlity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature   Signature registered agent and ites applicable.   (NOTE: Registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					City				EI	Zip Code	e
Signature typed or princet rame or ingreened agent and tell a appicable. (INCTE: Registered Agent algressure required an encertailing)   S.5.00 May Ba   Make check payable to Florida Department of State   10.				or the purpose of changing	its registered offic	e or register	red agent, or both,	in the State of Flo			and accept
Trust Fund Contribution.   Addied to Fees   Florida Department of State											ļ
TITLE MAME BEARD, TERRELL 12551 N.E. 25TH AVENUE ANTHONY, FL. 32617  ITILE MAME BEARD, TIMOTHY 9328 MCFARLAND WAY MOBILE, AL 36695  CITY-ST-2P  TITLE MAME STREET ADDRESS CITY-ST-2P  TITLE MAME BEARD, WENDY STREET ADDRESS CITY-ST-2P  TITLE MAME BEARD, WENDY STREET ADDRESS CITY-ST-2P  TITLE MAME BEARD, HERBERT STREET ADDRESS CITY-ST-2P  TITLE MAME STREET ADDRESS CITY-ST-2P	SIGNATURE .		or printed name of registered agen	I and title if applicable. (N	OTE: Registered Agent s	gnature required	d when reinstating)		DATE		
BEARD, TERRELL SIRET ADDRESS CITY-ST-ZP ANTHONY, FL 32617  ITILE OFFICIAL SET MACHINE SIRET ADDRESS CITY-ST-ZP ANTHONY, FL 32617  ITILE SEER ADDRESS CITY-ST-ZP STAPE OFFICIAL SET MACHINE SIRET ADDRESS CITY-ST-ZP TITLE THE SEARD, TIMOTHY STRET ADDRESS CITY-ST-ZP STRET ADDRESS CITY-ST-ZP TITLE THE SEARD, WENDY STRET ADDRESS CITY-ST-ZP TITLE THE SEARD, MERBERT STRET ADDRESS CITY-ST-ZP TITLE THANKE SIRET ADDRESS CITY-ST-ZP TITLE THE SEARD, HERBERT STRET ADDRESS CITY-ST-ZP TITLE THE STRET ADDRESS CITY-ST-ZP THE STRET ADDRESS CITY-ST-ZP THE STRET ADDRESS CITY-ST-ZP THE STRET ADDRESS CITY-ST-ZP TITLE THE STRET ADDRESS CITY-ST-ZP TITLE THE STRET ADDRESS CITY-ST-ZP TITLE THE STRET ADDRESS CITY-ST-ZP THE STRET ADDRESS THE STRET ADDRESS CITY-ST-ZP THE STRET ADDRESS C	SIGNATURE .	Signature, typed	e is \$61.25	9. Election C	ampaign Financir	ng	\$5.00 May Be		lake chec		
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12. Thereby 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 it made under path; that I am an officer or director.	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	P BEARD, T 12551 N.E ANTHON* V BEARD, T 9328 MCF MOBILE, S BEARD, V 9328 MCF MOBILE, T BEARD, F 318 AVEN	OFFICERS AND DI TERRELL E. 25TH AVENUE Y, FL 32617  TIMOTHY FARLAND WAY AL 36695  WENDY FARLAND WAY AL 36695  HERBERT NUE B	9. Election C Trust Fund IRECTORS  Delete  Delete  Delete	Campaign Financir d Contribution.  11.  TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI CITY - ST - ZIP TITLE NAME STREET ADDRI		\$5.00 May Be Added to Fees ADDITIONS/CHAN	Flor	RS AND D	Change  Change	Addition  Addition  Addition

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 otherwise empowered.

SIGNATURE:

FILED Mar 12, 2007 8:00 am Secretary of State