

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001485

FILED
May 31, 2007
Secretary of State

Entity Name: DARE NOT WALK ALONE CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

P.O. BOX 3792
SAINT AUGUSTINE, FL 320853792

New Principal Place of Business:

20 ATLANTIC AVENUE
SAINT AUGUSTINE, FL 32084

Current Mailing Address:

P.O. BOX 3792
SAINT AUGUSTINE, FL 320853792

New Mailing Address:

P.O. BOX 3792
SAINT AUGUSTINE, FL 32085

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN RD
SUITE 400
MIAMI BEACH, FL 33139 US

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: DEAN, JEREMY
Address: 84 BRIDGE STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D () Delete
Name: COBB, STEPHEN
Address: 20 ATLANTIC AVENUE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D () Delete
Name: COBB, CHEY
Address: 20 ATLANTIC AVENUE
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DEAN, JEREMY
Address: 16 MANHATTAN AVE APT 3G
City-St-Zip: BROOKLYN, NY 11206

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 exemption stated 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 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: STEPHEN COBB

D

05/31/2007

Electronic Signature of Signing Officer or Director

Date