

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000007663

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** SILVER DOME FOUNDATION, INC.

**Current Principal Place of Business:**

2901 TYRON CIRCLE  
TALLAHASSEE, FL

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 406  
TALLAHASSEE, FL 32302

**New Mailing Address:**

**FEI Number:** 80-0631027

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOORE, JUANITA  
2901 TYRON CIRCLE  
TALLAHASSEE, FL US

**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:** TP  
**Name:** MOORE, JUANITA  
**Address:** 2901 TYRON CIRCLE  
**City-St-Zip:** TALLAHASSEE, FL

**Title:** TVP  
**Name:** HOLMES, VON  
**Address:** 3793 FORSYTHE WAY  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** TS  
**Name:** MALOY, DORIS  
**Address:** 2324 NAPOLEON BONAPARTE DR  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** TT  
**Name:** NIX, TERESA  
**Address:** 8823 SAPPHIRE DR  
**City-St-Zip:** TALLAHASSEE, FL 32308

I hereby 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 all other like empowered.

**SIGNATURE:** TERESA L. NIX

TT

01/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date