


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 08, 2004 08:00 AM
Secretary of State

DOCUMENT # N12994 1. Entity Name THE BETTY WILLIAMS FOUNDATION, INC.	
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Principal Place of Business % JACQUELYN WILLIAMS CAOLO 131 E. WOODLAND DR. SANFORD, FL 32773	Mailing Address % JACQUELYN WILLIAMS CAOLO 131 E. WOODLAND DR. SANFORD, FL 32773
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CAOLO, JACQUELYN WILLIAMS
131 E. WOODLAND DR.
SANFORD, FL 32771**

**DO NOT WRITE
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 September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**U00000171807
09/08/04-80006-017 61.25**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCS CAOLO, JACK PATTON 2833 DYER ST DALLAS, TX 75205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CAOLO, JACQUELYN W. 131 E. WOODLAND DR. SANFORD, FL 32773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DODDRIDGE, AMY 2536 MOHAWK AVENUE SANFORD, FL 32773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Jack Patton* *Dir-Chairman* 9-1-04 ²¹⁴ 505-1981
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #