

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39966

FILED
Apr 21, 2009
Secretary of State

Entity Name: THE JOHN DUDA FOUNDATION, INC.

Current Principal Place of Business:

1200 DUDA TRAIL
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 620257
OVIEDO, FL 32765 US

New Mailing Address:

C/O A. DUDA & SONS, INC.
P.O. BOX 620257
OVIEDO, FL 327620257 US

FEI Number: 59-3041359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUDA-NICHOLS, LINDA
C/O A.DUDA & SONS, INC.
1200 DUDA TRAIL
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

NICHOLS, LINDA DUDA
C/O A.DUDA & SONS, INC.
1200 DUDA TRAIL
OVIEDO, FL 32765 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: LINDA DUDA NICHOLS

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NICHOLS, LINDA DUDA
Address: 3900 N CR 426
City-St-Zip: GENEVA, FL 32732

Title: DVP () Delete
Name: MILLER, DIANA DUDA
Address: 1326 TIMBERLY LANE
City-St-Zip: MC LEAN, VA 22102

Title: DS () Delete
Name: STINSON, AUDREY DUDA
Address: 2436 MIKLER ROAD
City-St-Zip: OVIEDO, FL 32765

Title: DT () Delete
Name: CONNERY, DENISE DUDA
Address: 1431 S ATLANTIC AVENUE #304
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: DINGWELL, MARK EDWARD
Address: 188 MINNA STREET UNIT 38C
City-St-Zip: SAN FRANCISCO, CA 94105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NICHOLS, LINDA DUDA
Address: 3900 N CR 426
City-St-Zip: GENEVA, FL 32732

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LINDA DUDA NICHOLS

DP

04/21/2009

Electronic Signature of Signing Officer or Director

Date