## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## May 05, 2003 8:00 am Secretary of State DOCUMENT # N9800000318 05-05-2003 91423 038 \*\*\*\*61.25 DODT FAMILY FOUNDATION, INC. Principal Place of Business Mailing Address 2395LANDINGS CIRCLE 2395LANDINGS CIRCLE **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-0812002 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARRISON, GEORGE H Street Address (P.O. Box Number is Not Acceptable) 1206 MANATEE AVE. W. BRADENTON FL 34205 City Zip Code 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 SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 $\Box$ Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. **PSTD** Change Addition TITLE ☐ Delete TITLE DODT, ELIZABETH B NAME NAME 2395 LANDINGS CIRCLE STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Bradenton FL 34209 ☐ Change ☐ Delete TITLE ☐ Addition ANDREW, THERESA NAME NAME STREET ADDRESS -1226 BRYN MAWR ST-----STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32804 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition motley, Jennifer NAME NAME STREET ADDRESS 2154 RADCLIFFE DRIVE STREET ADDRESS CITY-ST-ZIP ATLANTA GA 30318 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. Thereby 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.

4/29/03 941-793-0584

**FILED**