2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003094

FILED Jan 21, 2006 Secretary of State

Entity Nar	ne: DAPHNE FOUNDATI	ON, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
136 CAVAI PALM BAY	LIER ST 7, FL 32909					
Current Mailing Address:			New Mailing Address:			
136 CAVAI PALM BAY	LIER ST ′, FL 32909					
FEI Number:	FEI Number	Applied For ()	FEI Number Not Appli	cable (X)	Certificate of Status Desired ()	
Name and	Address of Current Reg	stered Agent:	Name and	Address of	New Registered Agent:	
ALLEN, RO 136 CAVAI PALM BAY						
	named entity submits this of Florida.	statement for the purp	oose of changing it	s registered	office or registered agent, or b	oth,
SIGNATUR	RE:					
	Electronic Signature	of Registered Agent			Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () Delete ALLEN, ROBERT B 136 CAVALIER ST PALM BAY, FL 32909		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete ALLEN, NANCY 136 CAVALIER ST PALM BAY, FL 32909		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete SHIKOH, JANE ALLEN 136 CAVALIER ST PALM BAY, FL 32909		Title: Name: Address: City-St-Zip:	O (BEAN, KATHY 811 DUNKIRK PALM BAY, F	CAVE. NW	
Title: Name: Address: City-St-Zip:	D () Delete DEAN, JEFFREY 136 CAVALIER ST PALM BAY, FL 32909		Title: Name: Address: City-St-Zip:	O (DEAN, BRITT 106 PINEAPP PALM BAY, F	LE AVE. NE	
Title: Name: Address: City-St-Zip:	D () Delete DEAN, DIANE 136 CAVALIER ST PALM BAY, FL 32909		Title: Name: Address: City-St-Zip:	HARER, KATH 138 E. LEON		

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT B. ALLEN D 01/21/2006