

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003094

FILED
Mar 20, 2009
Secretary of State

Entity Name: DAPHNE FOUNDATION, INC.

Current Principal Place of Business:

136 CAVALIER ST
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

136 CAVALIER ST
PALM BAY, FL 32909

New Mailing Address:

136 CAVALIER STREET
PALM BAY, FL 32909

FEI Number: 02-0751877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, ROBERT B
136 CAVALIER ST
PALM BAY, FL 32909 US

Name and Address of New Registered Agent:

ALLEN, ROBERT B DR.
136 CAVALIER ST
PALM BAY, FL 32909 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: ROBERT B. ALLEN

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALLEN, ROBERT B
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: ALLEN, NANCY
Address: 136 CAVALIER ST
City-St-Zip: PALM BAY, FL 32909

Title: O () Delete
Name: BEAN, KATHY M
Address: 811 DUNKIRK AVE. NW
City-St-Zip: PALM BAY, FL 32907

Title: O () Delete
Name: DEAN, BRITTANY
Address: 106 PINEAPPLE AVE. NE
City-St-Zip: PALM BAY, FL 32905

Title: O () Delete
Name: HARER, KATHLEEN
Address: 138 E. LEON LANE
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: ROBERT B. ALLEN

DR.

03/20/2009

Electronic Signature of Signing Officer or Director

Date