2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006952

Entity Name: DELIVER THE DREAM, INC.

FILED Jan 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3223 NW 10TH TERRACE SUITE 602 FORT LAUDERDALE, FL 33309 **New Mailing Address: Current Mailing Address:** 3223 NW 10TH TERRACE SUITE 602 FORT LAUDERDALE, FL 33309 FEI Number: 65-0881619 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CEO () Delete () Change () Addition MORAN, PATRICIA G Name: Name: 3223 NW 10TH TERRACE SUITE 602 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33442 City-St-Zip: Title: () Delete Title: (X) Change () Addition ELLERT, KENT Name: KELLEHER, JAMES Name: Address: 350 E. LAS OLAS BLVD #1800 Address: 3931 NE 31ST AVENUE City-St-Zip: FORT LAUDERDALE, FL 33301 City-St-Zip: LIGHTHOUSE POINT, FL 33064 Title: STD () Delete Title: STD (X) Change () Addition GONZALEZ, JORGE E BAITER, JAMES E Name: Name: 433 PLAZA REAL, SUITE 335 Address: 111 JIM MORAN BLVD Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: BOCA RATON, FL 33432 Title: CD () Delete Title: () Change () Addition Name: CATLETT, RICHARD M Name: Address: ONE GATOR BOWL BLVD. Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: () Delete Title: () Change (X) Addition EGGLESTON, KATHY Name: Name: 9858 GLADES ROAD, SUITE 186 Address: Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: () Change (X) Addition GIERTZ-RICHARDSON, HOLLY Name: Name: Address: Address: 4605 BAYBERRY LANE TAMARAC, FL 33319 City-St-Zip: 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: JAMES E BAITER STD 01/09/2008