

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006805

FILED  
Apr 18, 2012  
Secretary of State

**Entity Name:** ST. PETERSBURG DREAM CENTER, INC.

**Current Principal Place of Business:**

1360 16TH STREET SOUTH  
BOX 35145  
SAINT PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

1360 16TH STREET SOUTH  
BOX 35145  
SAINT PETERSBURG, FL 33705

**New Mailing Address:**

**FEI Number:** 04-3642433

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

INFANZON, SAM  
1360 16TH STREET SOUTH  
SAINT PETERSBURG, FL 33705 US

**Name and Address of New Registered Agent:**

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:**

**Title:** S  
**Name:** BROWN, CRAIG  
**Address:** 1360 16TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33705

**Title:** T  
**Name:** FARIAS, MARIO  
**Address:** 1360 16TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33705

**Title:** P  
**Name:** INFANZON, SAMUEL  
**Address:** 1360 16TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33705

**Title:** D  
**Name:** PAYNE, JEFFREY  
**Address:** 1360 16TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33705

**Title:** D  
**Name:** SMYZER, ROGER  
**Address:** 4359 35TH ST NORTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33705

**Title:** D  
**Name:** LEADBEATER, DON  
**Address:** 1360 16TH STREET SOUTH  
**City-St-Zip:** SAINT PETERSBURG, FL 33705

I hereby 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 all other like empowered.

**SIGNATURE:** SAMUEL INFANZON

P

04/18/2012

Electronic Signature of Signing Officer or Director

Date