

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000111634

1. Entity Name
OUTDOOR DREAM CORPORATION

Principal Place of Business
3427 RECKER HWY
WINTER HAVEN FL 33880

Mailing Address
3427 RECKER HWY
WINTER HAVEN FL 33880

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FEI Number

39-3757037

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIDWELL, MICHAEL C
3010 MISSION OAKS TRAIL
BARTOW FL 33830

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIDWELL, MICHAEL C 3010 MISSION OAKS TRAIL BARTOW FL 33830	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like employees.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/16/02 863-299-3695

Date Daytime Phone #

FILED

03 SEP -8 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

02-03

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AV

CR2E034 (4/02)

September 2, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314
Ref: P01000111634
Fein# 59-3757037

Dear Sir or Madam,

I have enclosed a check-for-the-amount-of-\$300.00-and I am requesting that you reinstate my Florida Corporation of Outdoor Dream Corporation.

When I did not receive my 2003 Uniform Business Report for this year I went looking into my files to see if perhaps my clerk filed it and found this original 2002 form. I then went to research my check book to see if I sent a check in for this 2002 year. I did not. My clerk must have thought that this form was part of my other company PMH Group, Inc. which it was paid and filing completed.

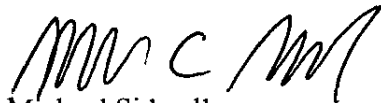
There has been no activity with Outdoor Dream , but now I am ready to start it up. I have my occupational license in place in Polk County. Fl.

This was totally an oversight and I am requesting that you reinstate for the \$300.00. Cathy from the Corporations office is the person that gave me the \$300.00 figure.

I would appreciate if you could also send me the 2003 filing papers so I will not be late on those.

Thank you for your help in this matter. If you should need to reach me my phone number is 863-299-3695.

Respectfully,

A handwritten signature in black ink, appearing to read 'Michael Sidwell', with a stylized 'C' in the middle.

Michael Sidwell