## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010311

**Entity Name:** D.R.E.A.M."DEVELOPING, REFRESHING, & EMPOWERING ALL MINDS" INC.

Feb 06, 2024 Secretary of State 7507664459CC

**FILED** 

## **Current Principal Place of Business:**

11126 S. US HWY 41 #111

GIBSONTON, FL 33534

## **Current Mailing Address:**

PO BOX 111

GIBSONTON, FL 33534 US

FEI Number: 47-2288566 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NETTLES, AARON D 11126 S. US HWY 41 #111 GIBSONTON, FL 33534 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

Officer/Director Detail:

Title PRESIDENT Title TRUSTEE

Name NETTLES, AARON D Name SHEPHARD, DEYSHUAN K

Address 1335 PASADENA BLOOM LANE Address 128 W. BOYLES ST.

City-State-Zip: RUSKIN FL 33570 City-State-Zip: JACKSON AL 36545

ony dialo zip. Thousand T 2 00070

Title SECRETARY Title VP

NameNETTLES, DE'ARON MALIKNameNETTLES, ANIAH DEMIAddress128 W. BOYLES ST.Address715 IVY BROOK WAY

City-State-Zip: JACKSON AL 36545 City-State-Zip: MACON GA 31210

Title CO-TRUSTEE

Name NETTLES, EMMA SOPHIA

Address CL 37 KR 18B -59 TORRE1 APTO 4B

URBANIZACIÓN LA ESPANOLA

City-State-Zip: CARTAGENA BOLIVAR

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: AARON D. NETTLES

PRESIDENT

02/06/2024