

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006952

Entity Name: DELIVER THE DREAM, INC.**Current Principal Place of Business:**3223 NW 10TH TERRACE
SUITE 602
FORT LAUDERDALE, FL 33309**Current Mailing Address:**3223 NW 10TH TERRACE
SUITE 602
FORT LAUDERDALE, FL 33309**FEI Number:** 65-0881619**Certificate of Status Desired:** No**Name and Address of Current 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

Officer/Director Detail :

Title CEO
Name KOHLER, MAUREEN
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title OTHER
Name CIANO, CHRISTOPHER
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title OTHER
Name MORAN, PAT
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name LOCKWOOD, SCOTT
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title SECRETARY/TREASURER
Name TIRADOR, JOSE
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title OFFICER, CHAIRMAN
Name PHILLIPS, KELLY
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title OTHER
Name GARCIA, ANDRES
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name MOSTAL, SHAWN
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

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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: MAUREEN KOHLER**EXECUTIVE DIRECTOR****03/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SEYFERT, JILL
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name GENCARELLI, DIANE
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title SECRETARY, TREASURER, OFFICER
Name LEVINE, ARTHUR
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name VEIRA, CAROLINA
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name STAFFORD, ROBERT
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name KIFFIN LEWIS, VALERIE
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name GARCIA, ANDRES
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name PAWAROO, PERRY
Address 3223 NW 10TH TERRACE
SUITE 602
City-State-Zip: FORT LAUDERDALE FL 33309