

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000099023

**Entity Name:** SEDONA DREAMS, INC.

**Current Principal Place of Business:**

501 E KENNEDY BLVD SUITE 1700  
TAMPA, FL 33602

**Current Mailing Address:**

501 E KENNEDY BLVD SUITE 1700  
TAMPA, FL 33602

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SHANNON, JEFFREY C  
501 E KENNEDY BLVD SUITE 1700  
TAMPA, FL 33602 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 P  
Name MILLER, CHARLES  
Address 1906 FLORESTA VIEW DR.  
City-State-Zip: TAMPA FL 33602

Title VP  
Name EVANS, DAVID  
Address 1300 PONDEROSA DR.  
City-State-Zip: EVERGREEN CO 80439

Title T, SECRETARY  
Name SHANNON, GINA  
Address 3160 LAKE ELLEN DR.  
City-State-Zip: TAMPA FL 33618

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GINA SHANNON

**SECRETARY**

**04/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date