

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000102863

**Entity Name:** DREAM REDEVELOPMENT, LLC

**Current Principal Place of Business:**

641 JAMESTOWN BLVD  
# 2141  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

641 JAMESTOWN BLVD  
# 2141  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 82-1498145

**Certificate of Status Desired:** No

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

NELSON, DOUGLAS  
641 JAMESTOWN BLVD  
# 2141  
ALTAMONTE SPRINGS, FL 32714 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

**Authorized Person(s) Detail :**

Title	AMBR	Title	AMBR
Name	NELSON, DOUGLAS	Name	NELSON, BARBARA
Address	641 JAMESTOWN BLVD #2141	Address	201 NEEDLES TRAIL
City-State-Zip:	ALTAMONTE SPRINGS FL 32714	City-State-Zip:	LONGWOOD FL 32779

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BARBARA NELSON

**CO-OWNER**

**03/11/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date