

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002819

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** DARE TO DREAM FOUNDATION, INC.

**Current Principal Place of Business:**

3790 KINGS WAY  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

3790 KINGS WAY  
BOCA RATON, FL 33434

**New Mailing Address:**

**FEI Number:** 22-3421616

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SHAFIR, GRACE  
3790 KINGS WAY  
BOCA RATON, FL 33434 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** SHAFIR, GRACE  
**Address:** 3790 KINGS WAY  
**City-St-Zip:** BOCA RATON, FL 33434

**Title:** D  
**Name:** ZANN, JEREANN  
**Address:** 131 SOUTHEAST 7TH WAY  
**City-St-Zip:** POMPANO BEACH, FL 33060 US

**Title:** D  
**Name:** SHAFIR, GEORGEANNA  
**Address:** ONE EAST LEXINGTON AVENUE, #510  
**City-St-Zip:** PHOENIX, AZ 85012 US

**Title:** D  
**Name:** JULIEN, JOANNE  
**Address:** 1601 NORTH OCEAN BOULEVARD  
**City-St-Zip:** GULFSTREAM, FL 33483

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:** GRACE SHAFIR

PD

03/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date