2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2011
Secretary of State

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Entity Name: TAMPA BAY DREAM CENTER, INC.

Current Principal Place of Business:

2705 N POPLAR AVE
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5285
TAMPA, FL 33675

New Mailing Address:

FEI Number: 59-3699995 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRAVER, WILLIAM
2705 N POPLAR AVE
TAMPA, FL 33602 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: CRAVER, WILLIAM
Address: 2705 N POPLAR AVE
City-St-Zip: TAMPA, FL 33602

Title: S
Name: CRAVER, KATHY
Address: 2705 N POPLAR AVE
City-St-Zip: TAMPA, FL 33602

Title: VP
Name: BLETHEN, BEN
Address: 29918 MORNINGMIST DR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T
Name: HERRON, ALLAN
Address: 317 MAE CRT
City-St-Zip: PALM HARBOR, FL 34684

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: WILLIAM CRAVER RA 04/04/2011
Electronic Signature of Signing Officer or Director Date