

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007247

FILED
Mar 14, 2012
Secretary of State

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

Title: ST
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: D
Name: WALTERS, GEORGE DR
Address: 7607 SHELTON RD
City-St-Zip: TAMPA, FL 33615

Title: D
Name: WALTERS, MICKEY DR
Address: 7607 SHELTON RD
City-St-Zip: TAMPA, FL 33615

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: KATHY CRAVER

ST

03/14/2012

Electronic Signature of Signing Officer or Director

Date