

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000731

FILED
Apr 06, 2009
Secretary of State

Entity Name: DANCING DREAM WIND, INC.

Current Principal Place of Business:

300 JULIA CIRCLE SOUTH
ST. PETE BEACH, FL 33706

New Principal Place of Business:

Current Mailing Address:

300 JULIA CIRCLE SOUTH
ST. PETE BEACH, FL 33706

New Mailing Address:

FEI Number: 59-3695844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACY, STEPHEN A CPA
13770 58TH ST N., STE. 304
CLEARWATER, FL 33760 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: PSD () Delete
Name: GORMAN, PATRICIA
Address: 300 JULIA CIRCLE SOUTH
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VPD () Delete
Name: GORMAN BOWLES, BENJAMIN
Address: 300 JULIA CIRCLE SOUTH
City-St-Zip: ST. PETE BEACH, FL 33706

Title: TD () Delete
Name: BOWLES, JEANETTE MARIE
Address: 300 JULIA CIRCLE SOUTH
City-St-Zip: ST. PETE BEACH, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA GORMAN

PSD

04/06/2009

Electronic Signature of Signing Officer or Director

Date