

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004699

FILED
Jul 08, 2009
Secretary of State

Entity Name: KEEPING DREAMS ALIVE FOUNDATION, INC.

Current Principal Place of Business:

400 NW 16TH AVE
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

400 NW 16TH AVE
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 65-1118283 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LOWE, PATRICK
400 NW 16TH AVE
POMPANO BEACH, FL 33069 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LOWE, PATRICK
Address: 400 NW 16TH AVE
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: D () Delete
Name: STOUTT, GLENN
Address: 3160 NW 114 LANE
City-St-Zip: CORAL SPRINGS, FL 33065 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PATRICK LOWE

PD

07/08/2009

Electronic Signature of Signing Officer or Director

Date