

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007291

FILED  
Jan 04, 2006  
Secretary of State

Entity Name: ORLANDO DREAM CENTER, INC.

**Current Principal Place of Business:**

258 E ALTAMONTE DRIVE, SUITE 1000  
ALTAMONATE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

258 E ALTAMONTE DRIVE, SUITE 1000  
ALTAMONATE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

BREWER, DONNA  
258 E ALTAMONTE DRIVE  
ALTAMONATE SPRINGS, FL 32701 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: D ( ) Delete  
Name: PHILLIPS, DAVID  
Address: 14500 ALACA CT  
City-St-Zip: ORLANDO, FL 32837

Title: D ( ) Delete  
Name: BREWER, DONNA  
Address: 258 E ALTAMONTE DRIVE  
City-St-Zip: ALTAMONATE SPRINGS, FL 32701

Title: D ( ) Delete  
Name: POLINO, DARA  
Address: 428 E HILLSCREST  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

**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 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: DONNA BREWER

D

01/04/2006

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

\_\_\_\_\_  
Date