

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008595

FILED
May 01, 2006
Secretary of State

Entity Name: X DREAM, INCORPORATED

Current Principal Place of Business:

5919 21ST STREET EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

5919 21ST STREET EAST
BRADENTON, FL 34203

New Mailing Address:

FEI Number: 55-0893863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MILLER, JAMES P
4540 GALWAY DRIVE
SARASOTA, FL 34232 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: D () Delete
Name: MAUST, KEITH D
Address: 6516 JENNA LEE COURT
City-St-Zip: LAKELAND, FL 33813 US

Title: D () Delete
Name: MAUST, KIRK A
Address: 969 SUNRIDGE DR
City-St-Zip: SARASOTA, FL 34234 US

Title: D () Delete
Name: MILLER, JAMES P
Address: 4540 GALWAY DR
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: WINSEY-RUDD, CHRISTINA
Address: 7149 JARVIS ROAD
City-St-Zip: SARASOTA, FL 34241

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:

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: JAMES P MILLER

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date