

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000009565

FILED
Mar 15, 2007
Secretary of State

Entity Name: DREAM LIFE CENTER, INC.

Current Principal Place of Business:

3100 SOUTH RIO GRANDE AVENUE
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 617290
ORLANDO, FL 32861

New Mailing Address:

FEI Number: 84-1656625 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:

GRAHAM, ANITA
3100 SOUTH RIO GRANDE AVENUE
ORLANDO, FL 32805 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: ANITA GRAHAM

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTDV () Delete
Name: GRAHAM, ANITA
Address: 3100 SOUTH RIO GRANDE AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: TREA () Delete
Name: BOOKER, DEBORAH
Address: 3100 SOUTH RIO GRANDE AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: SEC () Delete
Name: BELLAMY, CAFFEE
Address: 3100 SOUTH RIO GRANDE AVENUE
City-St-Zip: ORLANDO, FL 32805

Title: DIR () Delete
Name: FRYAR, LOUISE
Address: 3100 SOUTH RIO GRANDE AVENUE
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTDV (X) Change () Addition
Name: BOOKER, MICHAEL
Address: 3100 SOUTH RIO GRANDE AVENUE
City-St-Zip: ORLANDO, FL 32805

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: DEBORAH BOOKER

TREA

03/15/2007

Electronic Signature of Signing Officer or Director

Date