

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006633

FILED  
Sep 27, 2012  
Secretary of State

Entity Name: DREAM GIVERS U.S.A., INC.

## Current Principal Place of Business:

%PHILP V. MARTINO C/O QUARLES & BRADY LLP  
101 E. KENNEDY BLVD. STE 3400  
TAMPA, FL 33602

## New Principal Place of Business:

KERI GAWRYCH  
10231 GARDEN ALCOVE DRIVE  
TAMPA, FL 33647

## Current Mailing Address:

%PHILP V. MARTINO C/O QUARLES & BRADY LLP  
101 E. KENNEDY BLVD. STE 3400  
TAMPA, FL 33602

## New Mailing Address:

KERI GAWRYCH  
10231 GARDEN ALCOVE DRIVE  
TAMPA, FL 33647

FEI Number: 20-4061468

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAWRYCH, KERI A  
10231 GARDEN ALCOVE DRIVE  
TAMPA, FL FL 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, C  
Name: GAWRYCH, KERI A  
Address: 10231 GARDEN ALCOVE DRIVE  
City-St-Zip: TAMPA, FL 33647

Title: D,V  
Name: MURMAN, SANDRA L  
Address: 101 E KENNEDY BLVD, SUITE 3400  
City-St-Zip: TAMPA, FL 33602

Title: D,T  
Name: HEWLETT, TODD A  
Address: 101 E KENNEDY BLVD, SUITE 3400  
City-St-Zip: TAMPA, FL 33602

Title: D,S  
Name: MARTINO, PHILIP V  
Address: 101 E KENNEDY BLVD, SUITE 3400  
City-St-Zip: TAMPA, FL 33602

I hereby 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 all other like empowered.

SIGNATURE: KERI A. GAWRYCH

CHM

09/27/2012

Electronic Signature of Signing Officer or Director

Date