

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009896

FILED  
Apr 16, 2012  
Secretary of State

Entity Name: THE DREAM SOCIETY, INC.

## Current Principal Place of Business:

2659 EAST GULF TO LAKE HWY., PMB# 108  
INVERNESS, FL 34453 US

## New Principal Place of Business:

1912 PONTOON PLACE  
KISSIMMEE, FL 34746 US

## Current Mailing Address:

2659 EAST GULF TO LAKE HWY., PMB# 108  
INVERNESS, FL 34453 US

## New Mailing Address:

1912 PONTOON PLACE  
KISSIMMEE, FL 34746 US

FEI Number: 20-5696029

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

TRICIA, RICCARDI  
2659 EAST GULF TO LAKE HWY., PMB# 108  
INVERNESS, FL 34453 US

## Name and Address of New Registered Agent:

TRICIA, RICCARDI  
1912 PONTOON PLACE  
KISSIMMEE, FL 34746 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: TRICIA RICCARDI

04/16/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DC  
Name: MIRANTI, VICKI  
Address: 2758 E SQUIRREL CT  
City-St-Zip: INVERNESS, FL 34452

Title: DP  
Name: RICCARDI, TRICIA  
Address: 1912 PONTOON PLACE  
City-St-Zip: KISSIMMEE, FL 34746

Title: DS  
Name: MARSHALL, RICCARDI  
Address: 1912 PONTOON PLACE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VCD  
Name: BUDHRAM, BEBI  
Address: 152 WESTMORELAND CIRCLE  
City-St-Zip: KISSIMMEE, FL 34744

Title: TD  
Name: MIRANTI, SAL  
Address: PO BOX 145  
City-St-Zip: INVERNESS, FL 34450

Title: VD  
Name: MIRANTI, MICHAEL  
Address: 2758 E SQUIRREL CT  
City-St-Zip: INVERNESS, FL 34452

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: TRICIA RICCARDI

MRS

04/16/2012

Electronic Signature of Signing Officer or Director

Date