2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012993

Apr 04, 2008 Secretary of State

Entity Name: DAYDREAMER ENTERPRISES FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 340 ROYAL POINCIANA WAY

SUITE 340 PALM BEACH, FL 33480

New Mailing Address: Current Mailing Address:

340 ROYAL POINCIANA WAY SUITE 340 PALM BEACH, FL 33480

OFFICERS AND DIRECTORS:

FEI Number: 20-8090755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

METTLER SHELTON RANDOLPH CARROLL & STERLAC 340 ROYAL POINCIANA WAY SUITE 340 PALM BEACH, FL 33480 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition DAY, DEBRA DAY, DEBRA Name: Name: 340 ROYAL POINCIANA WAY Address: 340 ROYAL POINCIANA WAY, SUITE 340 Address: PALM BEACH, FL 33480 PALM BEACH, FL 33480

City-St-Zip: City-St-Zip:

Title: Title: D (X) Change () Addition () Delete

DAY, TAWNE Name: DAY, TAWNE Name:

340 ROYAL POINCIANA WAY, SUITE 340 Address: 340 ROYAL POINCIANA WAY Address:

City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

Title: () Delete Title: (X) Change () Addition DAY, LANCE DAY, LANCE Name: Name:

340 ROYAL POINCIANA WAY Address: Address: 340 ROYAL POINCIANA WAY, SUITE 340

City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

(X) Change () Addition Title: () Delete Title: Name: GATELY, HEATHER Name: GATELY, HEATHER

340 ROYAL POINCIANA WAY, SUITE 340 Address: 340 ROYAL POINCIANA WAY Address:

City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

I hereby certify that the information supplied with this filing does not qualify 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: DEBRA DAY D 04/04/2008