

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008018

FILED
Jun 30, 2009
Secretary of State

Entity Name: DREAM CENTER OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

12950 WEST STATE ROAD 84
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

12950 WEST STATE ROAD 84
DAVIE, FL 33325

New Mailing Address:

PO BOX 551661
FORT LAUDERDALE, FL 33355

FEI Number: **FEI Number Applied For (X)** **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:

RIOS, ELIZABETH D
18622 SW 41ST STREET
MIRAMAR, FL 33029 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: PD () Delete
Name: ALBIN, LISA
Address: 12950 W STATE ROAD 84
City-St-Zip: DAVIE, FL 33325

Title: SD () Delete
Name: RODRIGUEZ, NICOLE
Address: 1561 N.E. 179TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: TD (X) Delete
Name: RADFORD, LORI
Address: 2411 N.W. 98TH LANE
City-St-Zip: SUNRISE, FL 33322

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:

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: ELIZABETH RIOS

RA

06/30/2009

Electronic Signature of Signing Officer or Director

Date