

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000824

FILED
May 02, 2010
Secretary of State

Entity Name: CHRISTMAS DREAMS, INCORPORATED

Current Principal Place of Business:

5325 PEN AVE.
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

5325 PEN AVE.
SANFORD, FL 32773

New Mailing Address:

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:

Name and Address of New Registered Agent:

STAYER, LEEANN
5325 PEN AVE.
SANFORD, FL 32773 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

OFFICERS AND DIRECTORS:

Title: D
Name: DIXON, JEFF
Address: P.O. BOX 9519958
City-St-Zip: LAKE MARY, FL 32795

Title: D
Name: STAYER, LEEANN
Address: 5325 PEN AVE.
City-St-Zip: SANFORD, FL 32773

Title: D
Name: PIPER, DAVID
Address: 104 THIRD AVENUE E
City-St-Zip: WINDERMERE, FL 34786

Title: D
Name: SIMMONDS, MICHAEL
Address: 2872 ENGLISH DR.
City-St-Zip: DELTONA, FL 32738

Title: D
Name: ISRAEL, RICHARD
Address: 3719 ANDOVER CAY BLVD.
City-St-Zip: ORLANDO, FL 32825

Title: D
Name: JOHNSON, LEROY
Address: 5348 CARTER RD.
City-St-Zip: LAKE MARY, FL 32746

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: JEFF DIXON

D

05/02/2010

Electronic Signature of Signing Officer or Director

Date