

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000992

FILED  
Mar 29, 2012  
Secretary of State

**Entity Name:** BUTTERFLIES & DREAMS BOOK CLUB, INC

**Current Principal Place of Business:**

2939 N OSPREY AVE  
SARASOTA, FL 34234

**New Principal Place of Business:**

**Current Mailing Address:**

2939 N OSPREY AVE  
SARASOTA, FL 34234

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HOLLAWAY, FRANCINA M  
5104 N LOCKWOOD RIDGE RD  
101  
SARASOTA, FL 34234 US

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

JONES, JOGINA  
2939 N OSPREY AVE  
SARASOTA, FL 34234 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: JOGINA JONES

03/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JONES, JOGINA  
Address: 2939 N OSPREY AVE  
City-St-Zip: SARASOTA, FL 34234 US

Title: VP  
Name: SUAREZ, LAVENDER  
Address: 4131 N PRAIRIE VIEW DR  
City-St-Zip: SARASOTA, FL 34234 US

Title: S  
Name: DAWKINS, DEMETRUS  
Address: 6808 46TH TERRACE E  
City-St-Zip: BRADENTON, FL 34203 US

Title: T  
Name: HOLLAWAY, FRANCINA  
Address: 5637 FORESTER LAKE DR  
City-St-Zip: SARASOTA, FL 34243 US

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: JOGINA JONES

PRES

03/29/2012

Electronic Signature of Signing Officer or Director

Date