

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 NOV 12 PM 12:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003704

1. Entity Name

DREAMMS for Kids, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
273 Ringwood Road

Suite, Apt. #, etc.

3. Mailing Address  
273 Ringwood Road

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Freeville, NY

City & State  
Freeville, NY

4. FEI Number  
59-3200875

Applied For  
Not Applicable

Zip  
13068

Country  
USA

Zip  
13068

Country  
USA

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Hampton Powers

Street Address (P.O. Box Number is Not Acceptable)

12011 North 52nd Street

City  
Temple Terrace

FL

Zip Code  
33617

8. 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

*Hampton Powers II*

HAMPTON M. POWERS II

10/23/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEI IS \$61.25  
Initial or Amended UBR

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

|  |  |  |   |
|--|--|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>Janet P. Hosmer<br>273 Ringwood Road<br>Freeville, NY 13068   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | 800008942978<br>11/12/02--01126--003 **\$9.75 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>Chester D. Hosmer<br>273 Ringwood Road<br>Freeville, NY 13068 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>Nancy Brown<br>11 Bills Way<br>Freeville, NY 13068            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DO NOT WRITE<br/>IN THIS SPACE</b>         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

*Janet P. Hosmer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janet P. Hosmer

10/22/02

607-539-3027

Date

Daytime Phone #

CR2E037B (12/01)



**DREAMMS  
FOR KIDS, INC.**  
*Assistive Technology Solutions*

October 22, 2002

Uniform Business Report Department  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sir or Madam:

The purpose of this letter is to inform you that we have not received forms to file since they were not being forwarded to the new address.

All information in the current UBR is accurate and up to date. Enclosed is the \$61.25 fee and \$8.75 for a Certificate of Status.

Thank you.

Warm regards,



Janet P. Hosmer  
Executive Director