

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002770

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Entity Name:** THE FOUNDATION FOR DREAMS, INC.

**Current Principal Place of Business:**

16110 DREAM OAKS PLACE  
BRADENTON, FL 34212

**New Principal Place of Business:**

**Current Mailing Address:**

16110 DREAM OAKS PLACE  
BRADENTON, FL 34212

**New Mailing Address:**

**FEI Number:** 65-0704986

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MULOCK, EDWIN T  
519 13TH STREET WEST  
BRADENTON, FL 34205 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: P  
Name: MULOCK, EDWIN T  
Address: 519 13TH ST W  
City-St-Zip: BRADENTON, FL 34209

Title: V  
Name: MILLER, WALTER  
Address: 6516 23RD AVE W  
City-St-Zip: BRADENTON, FL 34209

Title: VD  
Name: HAGER, DAN  
Address: 2811 MANATEE AVE W  
City-St-Zip: BRADENTON, FL 34205 US

Title: STD  
Name: LOZANO, PAM  
Address: 353 SUWANEE AVENUE  
City-St-Zip: SARASOTA, FL 34243

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: JODI FRANKE

D

04/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date