2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002405

Entity Name: DREAM-A-WISH, INC.

FILED Jan 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 232 SAND PEBBLE CIRCLE PORT ORANGE, FL 32129 **Current Mailing Address: New Mailing Address:** 232 SAND PEBBLE CIRCLE PORT ORANGE, FL 32129 FEI Number: 59-3436624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KEISER, WOODROW 232 SAND PEBBLE CIRCLE US PORT ORANGE, FL 32129 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CEO () Change () Addition () Delete KEISER, WOODROW Name: Name: 232 SAND PEBBLE CIRCLE Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: Title: Title: DVP (X) Change () Addition () Delete MUISE, JOHN R Name: MUISE, JOHN R Name: Address: 15 SPRING DR Address: 15 SPRING DR City-St-Zip: PORT ORANGE, FL 32119 City-St-Zip: PORT ORANGE, FL 32119 Title: DP () Delete Title: (X) Change () Addition IZZETTI, MARIO WESTBERRY, SARAH Name: Name: Address: 129 SEA ISLE Address: 120 KON TIKI TERR. City-St-Zip: SOUTH DAYTONA, FL 32119 City-St-Zip: PORT ORANGE, FL 32129 Title: DS () Delete Title: (X) Change () Addition KEISER, PATRICIA Name: KEISER, PATRICIA Name: 232 SAND PEBBLE CIRCLE 232 SAND PEBBLE CIRCLE Address: Address: City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: PORT ORANGE, FL 32129 Title: () Delete Title: (X) Change () Addition DONAHUE, TERRY DONAHUE, TERRY Name: Name: 505 SPARROW DR. 505 SPARROW DR. Address: Address: City-St-Zip: EDGEWATER, FL 32141 City-St-Zip: EDGEWATER, FL 32141 Title: () Delete Title: () Change (X) Addition BORDA, JOYCE K Name: Name: Address: Address: 5656 ISABELLE AVE. PORT ORANGE, FL 32129 City-St-Zip: 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: WOODROW KEISER CEO 01/05/2008