# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 02, 2009**
**Secretary of State**

DOCUMENT# N98000006952

**Entity Name:** DELIVER THE DREAM, INC.

**Current Principal Place of Business:**

3223 NW 10TH TERRACE
SUITE 602
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

3223 NW 10TH TERRACE
SUITE 602
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

**FEI Number: 65-0881619** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: | CEO | ( ) Delete |
| Name: | MORAN, PATRICIA G | |
| Address: | 3223 NW 10TH TERRACE SUITE 602 | |
| City-St-Zip: | FORT LAUDERDALE, FL 33442 | |
| Title: | D | ( ) Delete |
| Name: | KELLEHER, JAMES | |
| Address: | 3931 NE 31ST AVENUE | |
| City-St-Zip: | LIGHTHOUSE POINT, FL 33064 | |
| Title: | STD | ( ) Delete |
| Name: | BAITER, JAMES E | |
| Address: | 433 PLAZA REAL, SUITE 335 | |
| City-St-Zip: | BOCA RATON, FL 33432 | |
| Title: | CD | ( ) Delete |
| Name: | CATLETT, RICHARD M | |
| Address: | ONE GATOR BOWL BLVD. | |
| City-St-Zip: | JACKSONVILLE, FL 32202 | |
| Title: | D | ( ) Delete |
| Name: | EGGLESTON, KATHY | |
| Address: | 9858 GLADES ROAD, SUITE 186 | |
| City-St-Zip: | BOCA RATON, FL 33434 | |
| Title: | D | ( ) Delete |
| Name: | GIERTZ-RICHARDSON, HOLLY | |
| Address: | 4605 BAYBERRY LANE | |
| City-St-Zip: | TAMARAC, FL 33319 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| 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: JAMES BAITER STD 02/02/2009

Electronic Signature of Signing Officer or Director — Date