

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000152542

Entity Name: DREAMS TO REALTY, INC.

FILED
Sep 15, 2006
Secretary of State

Current Principal Place of Business:

8300 PLAZA GATE LANE
SUITE 1192
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

8300 PLAZA GATE LANE
SUITE 1192
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 20-3830329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWEDLOW, BARRY
3832-010 BAYMEADOWS ROAD
SUITE #335
JACKSONVILLE, FL 32217 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWEDLOW, BARRY
Address: 8300 PLAZA GATE LANE/SUITE 1192
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP () Delete
Name: MITCHEM, MIKE
Address: 8787 SOUTHSIDE BLVD. /SUITE 4305
City-St-Zip: JACKSONVILLE, FL 32256

Title: TREA () Delete
Name: MITCHEM, MIKE
Address: 8787 SOUTHSIDE BLVD./SUITE 4305
City-St-Zip: JACKSONVILLE, FL 32256

Title: SEC () Delete
Name: ENDICOTT, LORI
Address: 8787 SOUTHSIDE BLVD./SUITE 4305
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: SNEED, CHRISTOPHER A
Address: P.O. BOX 54757
City-St-Zip: JACKSONVILLE, FL 32245

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI ENDICOTT

SEC

09/15/2006

Electronic Signature of Signing Officer or Director

Date