FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000065281 (5)

Country

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DREAM CATCHER, INC.

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 $Z_{\rm ID}$

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Principal Place of Business	Mailing Address					
11400 OVERSEAS HIGHWAY MARATHON FL 33050	P.O. BOX 522805 MARATHON SHORES FL 33052-2805	•				
			3. Date Incorporated or Qualified 09/06/1994	3a. Date of Last Report 02/05/1996		
2. Principal Place of Business	2a. Mailing Address		1. FEI Number		Applied For	
21	26		65-0520904		Not Applica	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing		\$5.00 May Be	

10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 WHITE, JOHN 11400 OVERSEAS HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) 114 83 **MARATHON FL 33050** Zip Code

Country

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Trust Fund Contribution

Florida Statutes

11. Pursuarit to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I amplamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	IM a who solly A. WHITE PASSMANT			STOR VE	2/10/07				
	slig-arure, typed or printed name of registered agent a		: Registered Agent signature		DATE	<i></i>			
12.	OFFICERS AND I	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	Р	DELETE	1.1 TITLE	;		Change	Addition		
NAME	WHITE, JOHN A		1.2 NAME						
STREET ADDRESS	11400 OVERSEAS HIGHWAY		1.3 STREET ADDRESS						
CHY-ST-ZIP	MARATHON FL 33050		1.4 CITY-ST-ZIP						
TITLE	:	DELETE	2.1 TITLE			Change	Addition		
NAME			2.2 NAME						
STREET ADDRESS		•	2.3 STREET ADDRESS						
CITY-ST-ZIF			2 4 CITY - ST-ZIP						
TITLE		DELETE	31 TITLE			Change	Addition		
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS	•					
CITY-ST-ZIP			3.4. CITY - ST-ZIP						
TATLE		DELETE	4.1 TITLE			Change	Addition		
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS	'			l		
CITY - ST - ZIP	l		4.4 CITY - ST - ZIP						
TiffLE		DELETE	5.1 TITLE	,		Change	Addition		
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY - \$1 - ZIF			5.4 CITY+ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE			Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS				ļ		
CITY-ST-ZIP			6.4 CITY-ST-ZIP						

I do 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

TOIT A WHITE - PROSIDENT 2/10/97

Applied For Not Applicable

Added to Fees

FILED

Feb 17 1997 8:00am

Secretary of State

This corporation has liability for intangible tax under s. 199.032,

Yes 🗌 No