

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000004569

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** BE A DREAMER PRODUCTIONS, INC.

**Current Principal Place of Business:**

3111 W. DR. MARTIN LUTHER KING BOULEVARD  
SUITE 100  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 892  
RIVERVIEW, FL 33568 US

**New Mailing Address:**

**FEI Number:** 59-3052882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILLIAMS, CAROLYN  
8302 BAHIA AVENUE  
TAMPA, FL 33619 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:** PTDC  
**Name:** KINSEY, ROSE W  
**Address:** 3111 W. DR. M. L. KING JR. BLVD STE 100  
**City-St-Zip:** TAMPA, FL 33607 US

**Title:** VSDM  
**Name:** WILLIAMS, CAROLYN  
**Address:** 8302 BAHIA AVENUE  
**City-St-Zip:** TAMPA, FL 33619 US

**Title:** TRUS  
**Name:** JONES, REV. ARTHUR T  
**Address:** 4811 EHRLICH ROAD  
**City-St-Zip:** TAMPA, FL 336242037

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ROSE WILLIAMS KINSEY

PTDC

04/28/2012

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

\_\_\_\_\_  
Date