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FILED
Apr 18 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000029381 (7)

1. Corporation Name

DREAM CATCHER REALTY, INC.



Principal Place of Business

Mailing Address

4901 E. SILVER SPRINGS BLVD.
#108
OCALA FL 34470-3200

4901 E. SILVER SPRINGS BLVD.
#108
OCALA FL 34470-3200

3. Date Incorporated or Qualified

04/10/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

59-3322889

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

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

☐

Yes

☒

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, PEGGY L
4901 E. SILVER SPRINGS BLVD.
#108
OCALA FL 34470-3200

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME ☐ DELETE

FOSTER, PEGGY L
4901 E. SILVER SPRINGS BLVD., SUITE 108
OCALA FL 34470-3200

1.1 TITLE ☐ Change ☐ Addition

TITLE NAME ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

1.2 NAME ☐ Change ☐ Addition

TITLE NAME ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE NAME ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE NAME ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE NAME ☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

SIGNATURE:

Peggy L Foster

4/15/97 (352) 236-4400

CR2E034 (9/96)