

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000051672

**FILED**  
**Jul 07, 2010**  
**Secretary of State**

**Entity Name:** THE DREAM WEAVER COLLECTION, INC.

**Current Principal Place of Business:**

364 ST. ARMANDS CIRCLE  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

364 ST. ARMANDS CIRCLE  
SARASOTA, FL 34236

**New Mailing Address:**

354-364 ST. ARMANDS CIRCLE  
SARASOTA, FL 34236

**FEI Number:** 65-0594011

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAMBRECHT, WILLIAM G  
200 SOUTH ORANGE AVE  
SARASOTA, FL 34236 US

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

MORGAN, JOAN E  
425 PARTRIDGE CIRCLE  
SARASOTA, FL 34236 US

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:** JOAN E MORGAN

07/07/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PRES  
**Name:** MORGAN, JOAN E  
**Address:** 425 PARTRIDGE CIRCLE  
**City-St-Zip:** SARASOTA, FL 34236

**Title:** VP  
**Name:** SEACE, ERIC  
**Address:** 3354 PLANTATION PLACE  
**City-St-Zip:** SARASOTA, FL 34231

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:** JOAN E MORGAN

PRES

07/07/2010

Electronic Signature of Signing Officer or Director

Date