

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000080257

Entity Name: DREAM BUILDERS INC

FILED  
Aug 09, 2007  
Secretary of State

## Current Principal Place of Business:

441 AYER ST  
MOLINO, FL 32577

## New Principal Place of Business:

8718 SHAW AVE  
PENSACOLA, FL 32534

## Current Mailing Address:

P O BOX 489  
MOLINO, FL 32577

## New Mailing Address:

P O BOX 7590  
PENSACOLA, FL 32534

FEI Number: 59-3469248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHIVERS, MYRA  
441 AYER ST  
MOLINO, FL 32577 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: CHIVERS, RAYMOND  
Address: 441 AYER ST  
City-St-Zip: MOLINO, FL 32577

Title: V ( ) Delete  
Name: PRESTON, DAVID  
Address: 720 W BOGIA RD  
City-St-Zip: MCDAVID, FL 32568

Title: ST ( ) Delete  
Name: CHIVERS, MYRA  
Address: 441 AYER ST  
City-St-Zip: MOLINO, FL 32577

## 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:

I hereby certify that the information supplied with this filing does not qualify 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: MYRA CHIVERS

ST

08/09/2007

Electronic Signature of Signing Officer or Director

Date