

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000040341

Entity Name: DREAM MARKETING, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

11637 E STEAMBOAT DRIVE
FLORAL CITY, FL 34436 US

New Principal Place of Business:

657 Balsa Dr
Altamonte Springs, FL 32714 US

Current Mailing Address:

11637 E STEAMBOAT DRIVE
FLORAL CITY, FL 34436 US

New Mailing Address:

657 Balsa Dr
Altamonte Springs, FL 32714 US

FEI Number: 59-3581315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, DAVE L
11637 E STEAMBOAT DRIVE
FLORAL CITY, FL 34436 US

Name and Address of New Registered Agent:

EHRHART, CLIFF R
657 Balsa Dr
Altamonte Springs, FL 32714 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: CLIFF EHRHART

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: EDWARDS, DAVE L
Address: 11637 E STEAMBOAT DRIVE
City-St-Zip: FLORAL CITY, FL 34436 US

Title: D () Delete
Name: EDWARDS, DEBRA F
Address: 11637 E STEAMBOAT DR
City-St-Zip: FLORAL CITY, FL 34436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: EHRHART, CLIFF R
Address: 657 Balsa Dr
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D (X) Change () Addition
Name: EDWARDS, DAVID L JR
Address: 2948 SOUTH SEMORAN BLVD #1204
City-St-Zip: ORLANDO, FL 32822 US

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: CLIFF EHRHART

O

04/16/2009

Electronic Signature of Signing Officer or Director

Date