

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000097528

FILED
Feb 14, 2002 8:00 AM
Secretary of State

Entity Name: DREAM BIG, INC.

Current Principal Place of Business:

4285 TURTLE MOUND ROAD
MELBOURNE, FL 32934

New Principal Place of Business:

Current Mailing Address:

4735 WILLOW BEND DRIVE
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3639930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLATT, JACK ESQ.
520 NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCDOWELL, JAMIE
Address: 4285 TURTLE MOUND ROAD
City-St-Zip: MELBOURNE, FL 32934

Title: SD () Delete
Name: JOHNSON, CANDICE
Address: 3368 LAKE VIEW CIRCLE
City-St-Zip: MELBOURNE, FL 32934

Title: TD () Delete
Name: CASTELLANA, PAMELA
Address: 4735 WILLOW BEND CIRCLE
City-St-Zip: MELBOURNE, FL 32935

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 for the exemption stated in Section 119.07(3)(i), 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: PAMELA L. CASTELLANA

TD

02/14/2002

Electronic Signature of Signing Officer or Director

_____ Date