

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002398

Entity Name: DREAM CENTER OF LAKE LAND, INC.**Current Principal Place of Business:**635 WEST 5TH STREET
LAKE LAND, FL 33805-4372**Current Mailing Address:**P O BOX 93522
LAKE LAND, FL 33804-3522 US**FEI Number:** 01-0686634**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MCBRIDE, DAN A
1401 GRIFFIN ROAD
LAKE LAND, FL 33810 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	MCBRIDE, DAN A
Address	2459 LAUREL GLEN DR.
City-State-Zip:	LAKE LAND FL 33803-5406

Title	D
Name	WALLACE, PAUL R
Address	4040 STAFFORDSHIRE DR.
City-State-Zip:	LAKE LAND FL 33809-4031

Title	CD
Name	BLACKBURN, M. WAYNE
Address	2209 MALACHITE DR.
City-State-Zip:	LAKE LAND FL 33810-8207

Title	D
Name	BALLARD, GARY
Address	5544 HILLSIDE LANDINGS ROAD
City-State-Zip:	LAKE LAND FL 33801-3243

Title	STD
Name	ENGLISH, DOUGLAS W
Address	7105 ODoniel LP W
City-State-Zip:	LAKE LAND FL 33809-4669

Title	D
Name	BOYD, JIM
Address	2752 BELLERIVE DR.
City-State-Zip:	LAKE LAND FL 33803-5472

Title	D
Name	HARRISON, DENNIS
Address	2465 LAUREL GLEN DR
City-State-Zip:	LAKE LAND FL 33803-5406

Title	D
Name	BLACKBURN, TIMOTHY W
Address	2263 LONGLEAF CIRCLE
City-State-Zip:	LAKE LAND FL 33810-8259

Continues on page 2

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS W. ENGLISH

STD

01/31/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name BROWN, GARY R
Address 320 CHARLESTON PLACE
City-State-Zip: KISSIMMEE FL 34747-5064

Title D
Name HALL, LEWIS
Address P.O. BOX 941
City-State-Zip: HIGHLAND CITY FL 33846-0941

Title D
Name INGLE, KENT DR.
Address 1926 HERITAGE ESTATES DRIVE
City-State-Zip: LAKELAND FL 33803-5410

Title D
Name MCCLELLAN, CECIL E JR.
Address 7409 SUMMIT AVENUE
City-State-Zip: LAKELAND FL 33810-4443

Title D
Name NICKELL, SHERRIE DR.
Address 6633 HUNTERFIELD ROAD
City-State-Zip: LAKELAND FL 33813-3537

Title D
Name ROTH, CRAIG H
Address 6251 FORESTWOOD DRIVE E
City-State-Zip: LAKELAND FL 33811-2402

Title D
Name THOMAS, LEE
Address 1925 SUNFLOWER STREET
City-State-Zip: BARTOW FL 33830-2947

Title D
Name BUSHEY, JOYCE A
Address 5638 BLOOMFIELD BLVD.
City-State-Zip: LAKELAND FL 33810-8202

Title D
Name HUNT, CHUCK
Address 5830 SCOTT LAKE HILLS LANE
City-State-Zip: LAKELAND FL 33813-3279

Title D
Name JOHNSON, SAMUEL K
Address 3108 HAWKS RIDGE DRIVE
City-State-Zip: LAKELAND FL 33810-4007

Title D
Name MCDANIEL, RUBEL
Address 2105 RAINBOWER DRIVE
City-State-Zip: LAKELAND FL 33810-8214

Title D
Name RABURN, TERRY R
Address P.O. BOX 24687
City-State-Zip: LAKELAND FL 33802-4687

Title D
Name RUTHERFORD, THOMAS S
Address 916 WALT WILLIAMS ROAD
City-State-Zip: LAKELAND FL 33809-2358

Title D
Name THOMPSON, MARK W
Address P.O. BOX 474
City-State-Zip: LAKELAND FL 33802-0474