## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000008173

Entity Name: THE CENTER FOR DREAMS, INC.

**Current Principal Place of Business:** 

7629 N. 56TH STREET TAMPA, FL 33617

**Current Mailing Address:** 

7629 N. 56TH STREET TAMPA. FL 33617 US

FEI Number: 46-3283254 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HENRY, CHARLAYNE 7629 N. 56TH STREET TAMPA, FL 33617 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 PRES Title VP

Name HENRY, CHARLAYNE Name THOMAS, NATALIA H

Address 7629 N. 56TH STREET Address 10411 GOLDENBROOK WAY

City-State-Zip: TAMPA FL 33617 City-State-Zip: TAMPA FL 33647

Title TRES

Name SMITH, CAROLYN

Address 10411 GOLDENBROOK WAY

City-State-Zip: TAMPA FL 33647

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: CHARLAYNE HENRY

Electronic Signature of Signing Officer/Director Detail

CEO

04/18/2014

FILED Apr 18, 2014

**Secretary of State** 

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