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07-13-2006 90021 019 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000085963

1. Entity Name
DIVERSIFIED PLASTICS RECYCLING, INC.

Principal Place of Business	Mailing Address
7340 SR 245 EAST NORTH LEWISBURG, OH 43060	7340 SR 245 EAST NORTH LEWISBURG, OH 43060

50022432

07072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0702300
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DENSON, RICHARD
7340 SR 245 EAST
NORTH LEWISBURG, FL. 43060

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DENSON, RICHARD
STREET ADDRESS	7340 SR 245 EAST
CITY-ST-ZIP	NORTH LEWISBURG, FL 43060
TITLE	VP
NAME	DENSON, SHIRLEY
STREET ADDRESS	7340 SR 245 EAST
CITY-ST-ZIP	NORTH LEWISBURG, FL 43060
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: R E Denson 7/7/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #