

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000088134

**FILED**  
**Jan 20, 2015**  
**Secretary of State**  
**CC6788367891**

**Entity Name:** DRN INVESTMENTS & MANAGEMENT, INC.

**Current Principal Place of Business:**

14201 W SUNRISE BLVD  
SUITE 103  
SUNRISE, FL 33323

**Current Mailing Address:**

14201 W SUNRISE BLVD  
SUITE 103  
SUNRISE, FL 33323

**FEI Number:** 37-1512838

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DORSCH, DELORES S  
3860 HERON RIDGE LANE  
WESTON, FL 33331 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 P  
Name DORSCH, DELORES S  
Address 3860 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

Title VP  
Name NEHSL, SHERI L  
Address 3860 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

Title VP  
Name ROACH, MICHELLE L  
Address 3860 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

Title D  
Name DORSCH, LEWIS J  
Address 3860 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

Title D  
Name ROACH, JAMES P  
Address 3860 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

Title D  
Name NEHLS, CURT  
Address 3860 HERON RIDGE LANE  
City-State-Zip: WESTON FL 33331

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

**SIGNATURE:** DELORES S DORSCH

**PRESIDENT**

**01/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date