2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 314190

Entity Name: DRIVE-IN THEATRES OF FLORIDA, INC.

FILED Jan 23, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2001 N. FEDERAL HWY. DELRAY BEACH, FL 33483 US

Current Mailing Address: New Mailing Address:

701 PARK DRIVE WEST 1067 MARBLE WAY

BOCA RATON, FL 33432 US BOCA RATON, FL 33432 US

FEI Number: 59-1009327 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOCKERY, N.S.

2001 N. FEDERAL HWY

CONCESSION ANNEX #2

DELRAY BEACH, FL 33444 US

TURBYFILL, NETTIE S PRES

1067 MARBLE WAY

BOCA RATON, FL 33432 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: NETTIE S TURBYFILL 01/23/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: TURBYFILL, NETTI Name: TURBYFILL, NETTI

 Address:
 2001 N FED HWY
 Address:
 1067 MARBLE WAY

 City-St-Zip:
 DELRAY BEACH, FL
 City-St-Zip:
 BOCA RATON, FL 33432 US

Title: V () Delete Title: () Change () Addition

Name:TURBYFILL, TERRENCEName:Address:2001 N. FED HWYAddress:City-St-Zip:DELRAY BEACH, FLCity-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 TURBYFILL, TÉRRENCE
 Name:

 Address:
 2001 N. FED. HWY
 Address:

 City-St-Zip:
 DELRAY BEACH, FL
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 TURBYFILL, THOMAS
 Name:

 Address:
 2001 N. FEDERAL HWY
 Address:

 City-St-Zip:
 DELRAY BEACH, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: NETTIE S TURBYFILL P 01/23/2006