FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

Principal Place of Business

895 BRISBANE STREET N.E.

G66113

(3)

895 BRISBANE STREET N.E.

Mailing Address

D. R. S. PROPERTIES, INC.



PALM BAT FL 32907			PALM DAT PL 32307									
								3. Date Incorporated or Qualified 10/24/1983	3a. Date o		t Report /1995	
2. Principal Place of Business			2a 26	Mailing Address				4. FEI Number 59-2357630			Applied For Not Applicable	
Suite, Apt #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
<u></u> 1	Crty & State			City & State				Election Campaign Financing Trust Fund Contribution			i.00 May Be dded to Fees	
24	Zip Country Zip C 25 29 30			k1	intry	Florida Statutes Yes No			rs 199.032,			
	g. Name a	and Address of Current	Regi	stered Agent	L 4	T		10. Name and Address of New Re	gistered A	gent		
						81	Name					
EVANS, DONALD 895 BRISBANE ST. NE						82						
				83								
						84	City		EI	85	Zip Code	

11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

SIGNATURE	gnature, types) or portlad han erof regulated agos I and Me it is	andras - ACT	E. Registeral Agent signature required	wher remstating: DATE
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PST	☐ DELETE	1 1 TITLE	Change Addition
NAME	MADAUSS, GINNY		1.2 NAME	
STREET ADDRESS	1911 S. RADNOR DR.		1.3 STREET ADDRESS	
CITY - ST - ZIP	MELBOURNE FL		1.4 CITY - ST - ZIP	
TITLE	VD	DELFTE	2 1 TITLE	Change Addition
NAME	EVANS, CAROL		2.2 NAME	
STREET ADDRESS	895 BRISBANE ST. NE		2 3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL		2 4 C(TY - ST - Z)P	
TITLE		☐ DELETE	3 1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ACORESS	
CHY-ST-ZIP			3.4 City - St - Zif	
TITLE		☐ DELETE	4 1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CHTY - ST - ZIP			4.4 CITY - ST - ZIP	
TITLE		DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5 2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CrTY-ST-ZIP			5.4 CITY - ST - ZiP	
TITLÉ		DEFELE	6 1 THILE	☐ Change ☐ Add-tion
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CHTY-ST-ZIP			6.4 CHY+S1+ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

× 4/29/96 407-952-6449

CR2E034 (12/95)