FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H12474

(3)

DRYDEN INVESTMENT CORPORATION

Principal Place of Business	Mailing Address	
111 WEST FORTUNE	111 WEST FORTUNE	

FILED May 08 1998 8:00am Secretary of State



111 WEST FO TAMPA FL 330		111 WEST FORTUNE TAMPA FL 33602		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/13/1984	
2. Principal Pl	lace of Business	2a. Mailing Address	***	4, FEI Number Applied F	
21		26		59-2726207 Not Appli	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required	
City & State	9	City & State		6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	8
	9. Name and Address of Curre	nt Registered Agent		10, Name and Address of New Registered Agent	
CAI	LLEN, DAVID H.		81 Name		
111 WEST FORTUNE STREET TAMPA FL 33602		82 Stree	Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City	FL 85 Zip Code	
11. Pursuant to office or reagent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	02 and 607.1508, Florida Statute e of Florida. Such change was au gations of, Section 607.0505, Flor	s, the above-name uthorized by the co ida Statutes.	d corporation submits this statement for the purpose of changing its regis rporation's board of directors. I hereby accept the appointment as registe	stered ered
SIGNATURE	Signature, typed or printed name of registered ac	CHOILE	Donistered Agent signals	re required when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2
TITLE	PD	☐ DELETE	1.1 TITLE		Addition
NAME	CALLEN, DAVID H.		1.2 NAME		
STREET ADDRESS	111 WEST FORTUNE STREE	T	1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE	☐ Change ☐ A	Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE	☐ Change ☐ A	Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change A	Addition
TITLE			4.2 NAME	Change Lain	100111011
NAME CTDSST ADDRESS			4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	☐ Change ☐ A	Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE	Change A	Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	portify that the information sympled	with this filing dose not qualify for		ted in Section 119 07(3)(i) Florida Statutes, I further certify that the inform	nation

Indicated on this annual report or supplied with this limit does not qualify to the exemptor sate in Section 179.07, 7,010, 7,010 a statutes. In the remarks indicated on this annual report or supplied annual report is true and accurate and that my signature shall have the same legal effect as if made under orath; that I am an officer or director of the corporation or the receiver or trustee employers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of Block 12 or Block 13 if changed, or or

4 11/11

4-15-98