

**FILED**  
**Feb 27, 2004 08:00 AM**  
**Secretary of State**

**2004 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

**DOCUMENT # J88915**  
 1. Entity Name  
**DREN ENTERPRISES, INC.**



Principal Place of Business 1801 GULF DRIVE WEST 151 RUNAWAY BAY BRADENTON, FL 34217	Mailing Address 3633 26TH ST W BRADENTON, FL 34205 US
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**DO NOT WRITE IN THIS SPACE**



02132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2840404	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 REID, EDWARD O PA  
 3633 26TH ST. W.  
 BRADENTON, FL 34205

**DO NOT WRITE  
 IN THIS SPACE**

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 re-registering)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2004 Fee will be \$550.00**

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

000000069453  
 03/01/04-80013-001 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PST HAZELHURST, TIMOTHY 1801 GULF DRIVE WEST BRADENTON, FL 34217
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HAZELHURST, PATRICIA 1801 GULF DRIVE WEST BRADENTON, FL 34217
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HAZELHURST, TIMOTHY 1801 GULF DRIVE WEST BRADENTON, FL 34217
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 I/we empowered.

SIGNATURE: *[Signature]* 2nd February 2004  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #