

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **K33210 (1)**

1. Corporation Name  
**DREW PARK PARTNERS, INC.**



Principal Place of Business: P.O. BOX 7001 WESLEY CHAPEL FL 33543  
 Mailing Address: P O BOX 7001 600 N. FLORIDA AVE. STE 1610 WESLEY CHAPEL FL 33543 US

3. Date Incorporated or Qualified: **09/08/1988**  
 3a. Date of Last Report: **04/14/1995**  
 4. FEI Number: **59-3145474**  
 Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21 **27529 S.R. 54**  
 Suite, Apt. #, etc.:  
 22  
 City & State: 23 **Wesley Chapel, FL**  
 Zip: 24 **33543** Country: 25 **USA.**  
 2a. Mailing Address: 26 **P.O. Box 7001**  
 Suite, Apt. #, etc.:  
 27  
 City & State: 28 **Wesley Chapel, FL**  
 Zip: 29 **33543** Country: 30 **U.S.A.**

9. Name and Address of Current Registered Agent

**REIBER, SAM I.**  
**601 E. TWIGGS STREET, SUITE 200**  
**TAMPA FL 33602-3954**

10. Name and Address of New Registered Agent

81 Name: **Larry G. Guilford**  
 82 Street Address (P.O. Box Number is Not Acceptable): **27529 S.R. 54**  
 83  
 84 City: **Wesley Chapel** FL 85 Zip Code: **33543**

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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **Larry G. Guilford, President** DATE: **1/24/96**

12. OFFICERS AND DIRECTORS

TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	<b>LINSKY, MICHAEL A.</b>	
STREET ADDRESS	<b>601 E. TWIGGS STREET, SUITE 200</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	<b>REIBER, SAM I.</b>	
STREET ADDRESS	<b>601 E. TWIGGS STREET, SUITE 200</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE	P	<input type="checkbox"/> DELETE
NAME	<b>GUILFORD, LARRY</b>	
STREET ADDRESS	<b>601 E. TWIGGS ST., SUITE 200</b>	
CITY-ST-ZIP	<b>TAMPA FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	<b>27529 S.R. 54</b>
3.4 CITY-ST-ZIP	<b>Wesley Chapel, FL 33543</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-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.

SIGNATURE: *[Signature]* **Larry G. Guilford** DATE: **1/24/96** Machine Printed #: **813 973-0478**

CR2E034 (12/95)