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May 07, 1999 8:00 am  
Secretary of State

05-07-1999 90178 034 \*\*\*158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # K33210

1. Corporation Name  
DREW PARK PARTNERS, INC.



Principal Place of Business: 27529 SR 54, WESLEY CHAPEL FL 33543, US

Mailing Address: P O BOX 7001, WESLEY CHAPEL FL 33543, US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/08/1988

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 owes the current year Intangible Personal Property Tax:  Yes  No

2. Principal Place of Business

21 5506 Shasta Dr 26 5506 Shasta Dr

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 Orlando Florida 28 Orlando Florida

24 32810 25 ORANGE 29 32810 30 ORANGE

9. Name and Address of Current Registered Agent: GUILFORD, LARRY G, 27529 SR 54, WESLEY CHAPEL FL 33543

10. Name and Address of New Registered Agent

81 Name: William Mehdrum

82 Street Address (P.O. Box Number is Not Acceptable): 5506 Shasta Dr

83

84 City: Orlando FL 85 Zip Code: 32810

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: William Mehdrum DATE: 4-30-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P GUILFORD, LARRY <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUILFORD, LARRY	1.2 NAME	
STREET ADDRESS	27529 SR 54	1.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	1.4 CITY-ST-ZIP	
TITLE	P William Mehdrum <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	William Mehdrum	2.2 NAME	
STREET ADDRESS	5506 Shasta Dr	2.3 STREET ADDRESS	
CITY-ST-ZIP	Orlando Fl. 32810	2.4 CITY-ST-ZIP	
TITLE	NEW <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: WILLIAM MEHDRAM DATE: 4-30-99

CR2E034 (11/98)