2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035979

Address:

City-St-Zip:

Entity Name: DRP COMMUNITY MANAGEMENT LLC

FILED Jan 16, 2009 Secretary of State

525 NW LAKE WHITNEY PLACE, SUITE 101

PORT ST. LUCIE, FL 34986

| Current Principal Place of Business: | | | | | New Principal Place of Business: | | | |
|---|---|-----------|-----------------------|-----------|---|-----------------|--|--|
| 525 N.W. L 101 | - _AKE WHITNE | EY PLACE | | | | | | |
| | LUCIE, FL 34 | 1986 US | | | | | | |
| Current Mailing Address: | | | | | New Mailing Address: | | | |
| | AKE WHITNE | EY PLACE | | | | | | |
| 101 PORT ST. | LUCIE, FL 34 | 1986 US | | | | | | |
| FEI Number: | 26-2684878 | FEI Numb | er Applied For() | FEI Nun | nber Not Appl | icable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | | Name and Address of New Registered Agent: | | | |
| 5200 N.W. PORT ST. The above | , MICHELLE EDGARTON LUCIE, FL 34 named entity of Florida. | | s statement for the p | ourpose o | f changing i | ts register | ed office or registered agent, or both | |
| SIGNATUR | | | | | | | | |
| Electronic Signature of Registered Agent | | | | | Date | | | |
| MANAGING MEMBERS/MANAGERS: | | | | | ADDITIONS/CHANGES: | | | |
| Title: Name: Address: City-St-Zip: | PARENT, DOR | WHITNEY P | LACE, SUITE 101 US | | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | () |) Delete | | | Title: Name: Address: City-St-Zip: | 525 NW L | () Change (X) Addition RTNERS, LLC, AKE WHITNEY PLACE, SUITE 101 LUCIE, FL 34986 | |
| Title: Name: | |) Delete | | | Title: Name: | MGR CROWE, I | ()Change(X)Addition PATRICIA | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: MICHELLE M. VALVANO MGR 01/16/2009