

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000002242

FILED  
Mar 17, 2004  
Secretary of State

Entity Name: D/R PROPERTY MANAGEMENT, INC.

## Current Principal Place of Business:

17 S. BELIZE LN.  
ROSEMARY BEACH, FL 32461

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 611051  
ROSEMARY BEACH, FL 32461

## New Mailing Address:

FEI Number: 02-0594037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KNOWLES, DONALD A JR  
17 S. BELIZE LN.  
ROSEMARY BEACH, FL 32461

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KNOWLES, DONALD A JR  
Address: 17 S. BELIZE LN.  
City-St-Zip: ROSEMARY BEACH, FL 32461

Title: D ( ) Delete  
Name: KNOWLES, CHERYL  
Address: 17 S. BELIZE LN.  
City-St-Zip: ROSEMARY BEACH, FL 32461

Title: D ( ) Delete  
Name: BATES, ROGER  
Address: 78 N. MYRTLE DR., UNIT 112  
City-St-Zip: SEAGROVE, FL 32459

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: KNOWLES, STEVE D  
Address: 42 KELMAR AVE.  
City-St-Zip: MALVERN, PA 19355

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD A. KNOWLES

PRES

03/17/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date