## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 19, 2007 8:00 am **Secretary of State** DOCUMENT # P02000080840 1. Entity Name 02-19-2007 90062 030 \*\*\*150.00 DRICA LAND DEVELOPMENT, INC. Principal Place of Business Mailing Address 12726 KEDLESTON CIRCLE FORT MYERS FL 33912 863 ENTRADA DR N FT MYERS FL 33919 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 12726 Kedleston Ciecuis Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) NA City & State City & State 4. FEI Number Applied For Ft. Myers 43-1975417 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent UNDERHILL, WILLIAM R 12126 KEDLESTON CIRCLE Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33912 City Zip Code 8. The above named entity submits this statement for the pu 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 9.05.20 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 **\$5.00** May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IIIŒ Delete THILE Change ☐ Addition UNDERHILL, BILL NAME 12726 KEDLESTON CIR STREET ADDRESS STREET ADDRESS FORT MYERS FL 33912 CITY-ST-ZIP CITY ST ZIP ☐ Detete TITLE THE Change Addition NAMI NAM STRLET ADDRESS STREET ADDRESS CITY ST-ZIP CHY ST-ZIP Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS C!TY-ST-ZIP CITY-ST-ZIP HILE Delete HILL ☐ Change ☐ Addition NAME NAMI STREET ADDRESS STREET ADDRESS C/TY+ST-7IP CITY-ST-7IP Delete THE ☐ Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TIFLE ☐ Delete DILE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 like empowered.

FILED