2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 05, 2008 8:00 am Secretary of State DOCUMENT # P02000080840 1. Entity Name 03-05-2008 90034 002 ***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 #, 12726 Keckleston Circus 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State 4. FEI Number Applied For 43-1975417 Not Applicable 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 maillin UNDERHILL, WILLIAM R 12126 KEDLESTON CIRCLE FORT MYERS FL 33912 William R. Underhice 8. The above named entity submits this statement for the ourgose 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. **ダ・**ダ2・~& SIGNATURE Signature, typed or metted name of registered attent and title if emplicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing, \$5.00 May Be After May 1, 2008 Fee Will Be \$550.00 Trust Fund Centribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete TITLE ☐ Change Addition UNDERHILL, BILL NAME STREET ADDRESS 12726 KEDLESTON CIR STREET ADORESS CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Derete THLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Delete TIFLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP De ele ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHEY-ST-ZIP TITLE ☐ Deiete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DITY-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 supplierrental 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 he 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 altrachment with an address, with all other like appoyaged.

FILED

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