2005 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

May 02, 2005 8:00 am Secretary of State **DOCUMENT # P02000128422** 05-02-2005 90524 036 ***150.00 1. Entity Name DRLP, INC. Principal Place of Business Mailing Address 50045715 300 SW 2 STREET 300 SW 2 STREET 8TH FLOOR 8TH FLOOR FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 02-0679665 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 JONES, PATRICIA Street Address (P.O. Box Number is Not Acceptable) C/O STILES CORPORATION 300 SW 2 STREET FORT LAUDERDALE, FL 33301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STILES, TERRY W NAME NAME STREET ADDRESS 300 SW 2 STREET STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33301 CITY-ST-ZIP VΤ TITLE ☐ Delete TITLE ☐ Change ☐ Addition EAGON, DOUGLAS P NAME NAME STREET ADDRESS **300 SW 2 STREET** STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33301 CITY-ST-ZIP VS TITLE ☐ Delete TITLE ☐ Change ☐ Addition JONES, PATRICIA NAME NAME STREET ADDRESS 300 SW 2 STREET STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33301 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STINE, JAMES W NAME NAME STREET ADDRESS 300 SW 2 STREET STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33301 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ■ Addition FERRERA, ROCCO NAME NAME STREET ADDRESS 300 SW 2 STREET STREET ADDRESS CITY-ST-7IP FT LAUDERDALE, FL 33301 CITY-ST-7IP TITLE TITLE ☐ Delete ☐ Change ■ Addition Asst. S PALMER, STEPHEN R NAME NAME Donna Florek STREET ADDRESS 300 SW 2 STREET STREET ADDRESS 300 SE 2ND St. FL333301 FT LAUDERDALE, FL 33301 CITY-ST-ZIP CITY-ST-ZIP 12. 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 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

FILED

ATTACHMENT

50045715 #P09000128422

10. CONTINUED

TITLE:

V

NAME:

O'SHEA, DENNIS F.

STREET ADDRESS:

300 SE 2nd St.

CITY-ST-ZIP:

Ft. Lauderdale, FL 33301