


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000128422
 1. Entity Name
 DRLP, INC.



Principal Place of Business Mailing Address
 300 SW 2 STREET 300 SW 2 STREET
 8TH FLOOR 8TH FLOOR
 FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301



01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 02-0679665 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 JONES, PATRICIA
 C/O STILES CORPORATION
 300 SW 2 STREET
 FORT LAUDERDALE, FL 33301

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6. 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 _____ DATE _____
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
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

00000507082
 04/27/06-80050-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	STILES, TERRY W
STREET ADDRESS	300 SW 2 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	VT
NAME	EAGON, DOUGLAS P
STREET ADDRESS	300 SW 2 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	VS
NAME	JONES, PATRICIA
STREET ADDRESS	300 SW 2 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	V
NAME	STINE, JAMES W
STREET ADDRESS	300 SW 2 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	V
NAME	FERRERA, ROCCO
STREET ADDRESS	300 SW 2 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33301
TITLE	V
NAME	PALMER, STEPHEN R
STREET ADDRESS	300 SW 2 STREET
CITY-ST-ZIP	FT LAUDERDALE, FL 33301

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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.

SIGNATURE: Terry W. Stiles Date: 3/10/06 Daytime Phone #: 954-627-9300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR