

2005 FOR PROFIT CORPORATION - AMENDED ANNUAL REPORT

DOCUMENT # P02000129352

1. Entity Name
DRV INVESTMENTS, INC.



05 JUN 18 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1452 VENDOME CT.
CAPE CORAL, FL 33904

Mailing Address
1452 VENDOME CT.
CAPE CORAL, FL 33904

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04212005

Chg-P

CR2E034 (10/03)

4. FEI Number

03-0495829

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SOUTHWEST PROFESSIONAL SERVICES OF SO. FL~~
~~13674 MCGREGOR BLVD #22~~
~~FORT MYERS, FL 33949~~

Name
HERITAGE TAX & CONSULTING SERVICES INC.

Street Address (P.O. Box Number is Not Acceptable)

11220 METRO PKWY #3

City

FORT MYERS

FL

Zip Code

33912

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

DAVE GOLDBERG
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/21/05
DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
VANAUKEN, ROBBIE
8470 CASA DEL RIO LN
FORT MYERS, FL 33949 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
VANAUKEN, Robbie
1020 WITTMAN DR.
FORT MYERS, FL 33919 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
VANAUKEN, DONALD
1452 VENDOME COURT
FORT MYERS, FL 33904 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
800056522458
06/24/05--01069--008 ***61.25 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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

SIGNATURE:

Donald Z. Vanauken
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-25-05
Date

Daytime Phone #