

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012108

Entity Name: DLR, INC.

FILED  
May 25, 2011  
Secretary of State

**Current Principal Place of Business:**

450 DISTRIBUTION DRIVE  
089  
MELBOURNE, FL 32904

**New Principal Place of Business:**

450 DISTRIBUTION DRIVE  
111  
MELBOURNE, FL 32904

**Current Mailing Address:**

P.O. BOX 120729  
W. MELBOURNE, FL 32912

**New Mailing Address:**

P.O. BOX 121818  
W. MELBOURNE, FL 32912

FEI Number: 51-0495040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RYALL, DAVID  
7745 S. DR.  
W. MELBOURNE, FL 32904 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: RYALL, DAVID  
Address: 7745 S. DR.  
City-St-Zip: W. MELBOURNE, FL 32904

Title: S  
Name: RYALL, CHERI  
Address: 7745 SOUTH DRIVE  
City-St-Zip: MELBOURNE, FL 32904

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: DAVID RYALL

D

05/25/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date