FILED Apr 16, 2007 8:00 am Secretary of State

2007	7 FOR PROFIT CORPORA	HUN
	ANNUAL REPORT	

DOCUMENT # P0400072747 1. Entity Name D R S PROPERTY INVESTMENTS, INC.						04-16-2007 90	_		0	
Principal Place of Business		Mailing Address		•	4000-					
15736 MUIRFIELD DRIVE 15736 MUIRFIELD DRIV ODESSA, FL 33556 US ODESSA, FL 33556			;							
0000011712					BENN ENER ERNN BENN BEN	II ii ii ii ii ii ii ii ii ii	1880 8489 1881			
2. Principal Place of Business No P.O. Box # 3. Mailing Address			à / A 4 ==							
Suite, Apt.	MAYFAIR LANC #, etc.	4200 MAYFAIR LANC Suite, Apt. #, etc.		03062007	Chg-P	CR2E034	1 (12/06)			
City & State	9	City & State			4. FEI Numbe		01122004		plied For	
PORT ORANGE, FL		PORTORANGE, FL		20-109			No	t Applicable		
32129 Country SA		Zip Country USA			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required					
	6. Name and Address of Current	Name	7. Name and Address of New Registered Agent							
	ODNEY W		570)	STONE, GONEY W						
15736 MUIRFIELD DRIVE ODESSA, FL 33556				Street Address (P.O. Box Number is Not Acceptable)						
ļ					_			T 20-1		
					ORANGE		<u>FL</u>	Zip Code	29	
8. The above the obligat	named entity submits this statement fo ions of registered agent.	r the purpose of changing its reg	istered office or	register	ed agent, or bot	h, in the State of Fl	orida. Tamifar /	niliar with, :	and accept	
SIGNATURE.	(Rody W. 8h	<u> </u>					3/12/	07_		
	Signature, typed of dinted name of registered agent a	and trite if applicable. (NOTE, Re	gistered Agent signatu	re required	when reinstating)		DATE			
FIL After Ma	FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	DIRECTORS Delete	11.	<u> </u>	ADDITIONS/	CHANGES TO OFF		NRECTORS Shange	3 IN 11	
NAME	IAME STONE, RODNEY W		NAME	443-	m 4 v M	h. 0 1 4 . m	•	51 outrido	·	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	Pop	OD MAYFAIR LANE DRTORANGE, FL 32129					
TITLE	VP	☐ Delete	TITLE	1				Change	Addition	
NAME STREET ADDRESS	STONE, DENISE L I NAM 15736 MUIRFIELD DRIVE STR			4200 MAY PAIR LANC PORTORANGE, FL 32129						
CITY-ST-ZIP	ODESSA, FL 33556			IP PORTORANGE, FL 32129						
TITLE	V STOVE, BENJAMIN J	Delete	TITLE NAME				[Change	Addition	
STREET ADDRESS	2424 OLD VILLAGE WAY		STREET ADDRESS							
CITY-ST-ZIP	OLDSMAR, FL 34677	Delete	CITY-ST-ZIP					Change	Addition	
NAME		_ outle	NAME				•			
STREET ADDRESS CITY-ST-ZIP			STREET ADORESS CITY-ST-ZIP							
TITLE		☐ Delete	TITLE					Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP	<u></u>						
TITLE		☐ Delete	TITLE NAME				[Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS							
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for the	CITY-ST-ZIP	ontainer	in Chanter 110	. Florida Statutes	L further certify	that the in	ntormation	
12. It hereby certify that the information supplied with this filling does not qualify for the examptions 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.										
changed, or on an attachment with an address, with all other like empowered.										