

**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 8:00 am**  
**Secretary of State**

01-18-2005 90075 001 \*\*\*150.00  
 01-18-2005 90075 002 \*\*\*\*\*8.75

DOCUMENT # P04000101008  
 1. Entity Name  
 DANROLEEN, INC.



Principal Place of Business Mailing Address  
 10113 SANDY HOLLOW LN 10113 SANDY HOLLOW LN  
 501 501  
 BONITA SPRING, FL 34135 BONITA SPRING, FL 34135

**66000142**



2. Principal Place of Business 3. Mailing Address  
 8346 Bamboo Rd 8346 Bamboo Rd  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

01102005 Chg-P CR2E034 (10/03)

City & State City & State  
 Fort Myers FL Fort Myers FL  
 Zip: 33912 Country USA Zip: 33912 Country U.S.A.

4. FEI Number Applied For  
 26-0091774 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  
 PEREDA, EILEEN Name Pereda, Eileen  
 10113 SANDY HOLLOW LN Street Address (P.O. Box Number is Not Acceptable)  
 501 8346 Bamboo Rd  
 BONITA SPRING, FL 34135 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 *Eileen Pereda* DATE 1/10/05  
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, 2005 Fee will be \$550.00**  
 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 PEREDA, EILEEN 10113 SANDY HOLLOW LN # 501 BONITA SPRING, FL 34135 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Pereda, Eileen 8346 Bamboo Rd Fort Myers, FL 33912 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Eileen Pereda* DATE 1/10/05 (239) 405-0463  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #