

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172461

Entity Name: DRP SERVICES, INC.

FILED
Jan 06, 2007
Secretary of State

Current Principal Place of Business:

1953 MAGNOLIA CIRCLE
TAVARES, FL 32778

New Principal Place of Business:

Current Mailing Address:

1953 MAGNOLIA CIRCLE
TAVARES, FL 32778

New Mailing Address:

FEI Number: 16-1712617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELL, DONALD R
1953 MAGNOLIA CIRCLE
TAVARES, FL 32778 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PELL, DONALD R
Address: 1953 MAGNOLIA CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: PELL, JANET L
Address: 1953 MAGNOLIA CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: PELL, KEVIN D
Address: 2665 EVERGREEN EVE CROSSING
City-St-Zip: DACULA, GA 30019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PELL, DONALD R PRES
Address: 1953 MAGNOLIA CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: D (X) Change () Addition
Name: PELL, JANET L VP
Address: 1953 MAGNOLIA CIRCLE
City-St-Zip: TAVARES, FL 32778

Title: D (X) Change () Addition
Name: PELL, KEVIN D DIR
Address: 2665 EVERGREEN EVE CROSSING
City-St-Zip: DACULA, GA 30019

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DONALD R PELL

PRES

01/06/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date