

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000172461

Entity Name: DRP SERVICES, INC.

FILED  
Jan 28, 2009  
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 PRES  
Address: 1953 MAGNOLIA CIRCLE  
City-St-Zip: TAVARES, FL 32778

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

01/28/2009

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

\_\_\_\_\_ Date