

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000116265

1. Entity Name
DREXLER-WITZ, INC.



Principal Place of Business
928 WEST BRANDON BOULEVARD
BRANDON, FL 33511

Mailing Address
928 WEST BRANDON BOULEVARD
BRANDON, FL 33511

DO NOT WRITE IN THIS SPACE

FILED
Jun 26, 2008 08:00 AM
Secretary of State



06182008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3346278	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CAMPBELL, TIMOTHY F
500 SOUTH FLORIDA AVENUE
800
LAKELAND, FL 33801

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
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
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP TRIMBATH, TIMOTHY D 928 WEST BRANDON BOULEVARD BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP FOX, KENNETH I 928 WEST BRANDON BOULEVARD BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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06/26/08-80001-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions 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.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/08 813-881-6775
Date Daytime Phone #