

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000022822

Entity Name: DPR, DIVERSIFIED INC.

FILED
Jul 15, 2004
Secretary of State

Current Principal Place of Business:

1140 LEE BLVD
STE 105
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

BOX 1164
LEHIGH ACRES, FL 33936

New Principal Place of Business:

1261 HOMESTEAD RD.
UNIT 223
LEHIGH ACRES, FL 33936 US

New Mailing Address:

FEI Number: 58-2167092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REEVE, DAVID
1140 LEE BLVD
STE 105
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

REEVE, DAVID
1261 HOMESTEAD RD.
UNIT 223
LEHIGH ACRES, FL 33936 US

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:

07/15/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REEVE, DAVID W
Address: 20230 CYPRESS CREEK ROAD
City-St-Zip: ALVA, FL 33920

Title: VP () Delete
Name: REEVE, PHYLLIS
Address: 20230 CYPRESS CREEK
City-St-Zip: ALVA, FL 33920

Title: S () Delete
Name: REEVE, PHYLLIS
Address: 20230 CYPRESS CREEK
City-St-Zip: ALVA, FL

Title: T () Delete
Name: AUSTIN, BERNICE
Address: 20230 CYPRESS CREEK RD
City-St-Zip: ALVA, FL 33920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REEVE, DAVID W
Address: 320 EDWARD AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VP (X) Change () Addition
Name: REEVE, DAVID
Address: 320 EDWARD AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: S (X) Change () Addition
Name: REEVE, DAVID
Address: 320 EDWARD AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: T (X) Change () Addition
Name: REEVE, DAVID
Address: 320 EDWARD AVE.
City-St-Zip: LEHIGH ACRES, FL 33972

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID W. REEVE

P

07/15/2004

Electronic Signature of Signing Officer or Director

Date