## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000101857

Entity Name: DRC DEVELOPMENT CORP.

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
438 STRASBURG DR PORT CHARLOTTE, FL 33954					110 PECKHAM ST SW PORT CHARLOTTE, FL 33952			
Current Mailing Address:					New Mailing Address:			
420 CTD A C					110 DECKL	LAM OT CAA		
438 STRAS PORT CHA	RLOTTE, FL	33954				HAM ST SW RLOTTE, FL	33952	
FEI Number:	65-0746478	FEI Num	nber Applied For()	FEI Nun	nber Not Appli	cable ( )	Certifica	ate of Status Desired ( )
Name and	Address of C	urrent R	egistered Agent:		Name and	Address of N	lew Reg	jistered Agent:
	N, CATHIE BURG DRIVE RLOTTE, FL		US			N, CATHIE HAM ST SW IRLOTTE, FL	33952	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: 02/02/2009								
Electronic Signature of Registered Agent					Date			
Election Cam	paign Financing	Trust Fur	nd Contribution ( ).					
					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP () GROSSMAN, CA 438 STRASBUR PORT CHARLOT	G DRIVE	3954		Title: Name: Address: City-St-Zip:	DP (X) GROSSMAN, C 110 PECKHAM PORT CHARLO	ATHIE ST SW	( ) Addition 33952
Title: Name: Address: City-St-Zip:	V () WOLFF, DARLE 110 PECKHAM PORT CHARLOT	ST SW	3952		Title: Name: Address: City-St-Zip:	()	Change	( ) Addition
Title: Name: Address: City-St-Zip:	D () WOLFF, DIANE 1184 GREEN OF PORT CHARLOT				Title: Name: Address: City-St-Zip:	( )	Change	( ) Addition
Title: Name: Address: City-St-Zip:	PD () GROSSMAN, CA 438 STRASBUR PORT CHARLOT	ATHIE G DR	3954		Title: Name: Address: City-St-Zip:	PD (X) GROSSMAN, C 110 PECKHAM PORT CHARLO	ATHIE ST SW	
Title: Name: Address: City-St-Zip:	T () WOLFF, DARLE 110 PECKHAM S PORT CHARLO	ST SW	3952		Title: Name: Address: City-St-Zip:	( )	Change	( ) Addition

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: CATHIE GROSSMAN DP 02/02/2009