


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 12, 2004 08:00 AM**  
**Secretary of State**

|   |   |
|---|---|
| <b>DOCUMENT # P98000017291</b><br>1. Entity Name<br>DRK, INC. |  |
|---|---|

|   |   |
|---|---|
| Principal Place of Business<br>6220 MT. PLYMOUTH ROAD<br>APOPKA, FL 32712 | Mailing Address<br>6220 MT. PLYMOUTH ROAD<br>APOPKA, FL 32712 |
|---|---|

**DO NOT WRITE IN THIS SPACE**



|                                  |                               |                                       |
|----------------------------------|-------------------------------|---------------------------------------|
| 07012004                         | No Chg-P                      | CR2E034 (10/03)                       |
| 4. FEI Number<br>59-3517583      | Applied For<br>Not Applicable |                                       |
| 5. Certificate of Status Desired | <input type="checkbox"/>      | <b>\$8.75</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

KIRKLAND, DONALD  
6220 MT. PLYMOUTH ROAD  
APOPKA, FL 32712

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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

|   |  |  |
|---|--|--|
| FILE NOW!!! FEE IS \$150.00<br>Due by September 8, 2004 | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> 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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>KIRKLAND, DONALD<br>6220 MT. PLYMOUTH ROAD<br>APOPKA, FL 32712 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ST<br>KIRKLAND, DEBRA<br>6220 MT. PLYMOUTH ROAD<br>APOPKA, FL 32712 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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07/12/04-80028-022 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 it 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: Donald R. Kirkland 7-10-04 407-886-6930  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #