


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 22, 2008 8:00 am
Secretary of State

04-22-2008 90018 021 ***150.00

DOCUMENT # P06000029008

1. Entity Name
DURBIN COMPANIES, INC.



Principal Place of Business Mailing Address

**1610 DRUMMOND AVE
 PANAMA CITY FL 32401
 US** **1610 DRUMMOND AVENUE
 PANAMA CITY FL 32401
 US**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

1923 N. East Ave Suite, Apt. #, etc.


Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Panama City, FL City & State

Zip Country Zip Country

32405 Country Zip Country



1st MOORE CR2E034 (10/07)

4. FEI Number Applied For

83-0450510 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**DURBIN, RONALD
 1610 DURMOND AVENUE
 PANAMA CITY FL 32401**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be Added to Fees

Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	VP/D	<input type="checkbox"/> Delete
NAME	DURBIN, RONALD E	
STREET ADDRESS	1610 DRUMMOND AVENUE	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	P/S	<input type="checkbox"/> Delete
NAME	DURBIN, KAREN L	
STREET ADDRESS	1610 DRUMMOND AVE	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Karen L Durbin* **4-1-08** **850-215-1299**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #