

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006136

FILED
Feb 23, 2006
Secretary of State

Entity Name: THE DURRANT GROUP, INC.

Current Principal Place of Business:

700 LOCUST STREET, STE 942
DUBUQUE, IA 52001

New Principal Place of Business:

Current Mailing Address:

700 LOCUST STREET, STE 942
DUBUQUE, IA 52001

New Mailing Address:

FEI Number: 42-1081135

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARSDEN, CHARLES R
Address: 700 LOCUST STREET SUITE 942
City-St-Zip: DUBUQUE, IA 52001

Title: CEO () Delete
Name: MILLS, GORDON E
Address: 700 LOCUST ST., STE 942
City-St-Zip: DUBUQUE, IA 52001

Title: VPD () Delete
Name: ALLEY, W D
Address: 3773 CHERRY CREEK N DR SUITE 1000
City-St-Zip: DENVER, CO 80209

Title: VPD () Delete
Name: SCHMITT, LOUIS A
Address: 410 N. 44TH STREET SUITE 800
City-St-Zip: PHOENIX, AZ 85008

Title: VSTD () Delete
Name: TRANNEL, JOSEPH A
Address: 700 LOCUST STREET SUITE 942
City-St-Zip: DUBUQUE, IA 52001

Title: VPD () Delete
Name: FLICKINGER, THOMAS F
Address: 5126 W. TERRADE DR., STE 100
City-St-Zip: MADISON, WI

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VSTD (X) Change () Addition
Name: THIELEN, LORI L
Address: 700 LOCUST STREET SUITE 942
City-St-Zip: DUBUQUE, IA 52001

Title: VPD (X) Change () Addition
Name: FLICKINGER, THOMAS F
Address: 4600 AMERICAN PARKWAY, SUITE 300
City-St-Zip: MADISON, WI

I hereby certify that the information supplied with this filing does not qualify for the 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: LORI L. THIELEN

VSTD

02/23/2006

Electronic Signature of Signing Officer or Director

_____ Date