

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K00538

FILED
Apr 25, 2007
Secretary of State

Entity Name: DURANT INSURANCE INC.

Current Principal Place of Business:

% J.D. DURANT
507 S. WAUKESHA
BONIFAY, FL 32425

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 610
BONIFAY, FL 32425

New Mailing Address:

FEI Number: 59-2859331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURANT, J.D.
507 S. WAUKESHA
BONIFAY, FL 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: P () Delete
Name: DURANT, JOSEPH D
Address: 3264 DURANT DR
City-St-Zip: BONIFAY, FL 32425

Title: S (X) Delete
Name: DURANT, CONSTANCE A
Address: 2769 MEADOWCREST LANE
City-St-Zip: SEVIERVILLE, TN 37876

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: J. DENNIS DURANT

P

04/25/2007

Electronic Signature of Signing Officer or Director

Date