

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L27200

FILED
Apr 27, 2007
Secretary of State

Entity Name: DURDEN LEASING, INC.

Current Principal Place of Business:

2605 THOMAS DR
PANAMA CITY, FL 32408 US

New Principal Place of Business:

Current Mailing Address:

2605 THOMAS DR
PANAMA CITY, FL 32408 US

New Mailing Address:

FEI Number: 59-2973318 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURDEN, K. EARL
2605 THOMAS DRIVE
PANAMA CITY BEACH, FL 32411 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: DCEO () Delete
Name: DURDEN, K. EARL,
Address: 2605 THOMAS DRIVE
City-St-Zip: PANAMA CITY, FL 32408

Title: DP () Delete
Name: DURDEN, MICHAEL E.,
Address: 2605 THOMAS DRIVE
City-St-Zip: PANAMA CITY, FL 32408

Title: T () Delete
Name: HELMS, D SCOTT
Address: 2605 THOMAS DRIVE
City-St-Zip: PANAMA CITY, FL 32408

Title: S () Delete
Name: PARKER, BARRY L
Address: 2605 THOMAS DR
City-St-Zip: PANAMA CITY, FL 32408

Title: ST (X) Delete
Name: ALLEN, LISA L
Address: 2605 THOMAS DR
City-St-Zip: PANAMA CITY, FL 32408

Title: AS () Delete
Name: SELLERS, ANN
Address: 2605 THOMAS DR
City-St-Zip: PANAMA CITY, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: ALLEN, LISA L
Address: 2605 THOMAS DR
City-St-Zip: PANAMA CITY, FL 32408

Title: S (X) Change () Addition
Name: ALLEN, LISA L
Address: 2605 THOMAS DR
City-St-Zip: PANAMA CITY, FL 32408

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: LISA L. ALLEN

SECR

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date