

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90387 041 \*\*\*150.00

<b>DOCUMENT # P03000030234</b> 1. Entity Name <b>WILLIAM A. DURRANCE REAL ESTATE, INC.</b>																													
Principal Place of Business <b>1920 LIGHTFOOT ROAD WIMAUMA, FL 33598</b>			Mailing Address <b>1920 LIGHTFOOT ROAD WIMAUMA, FL 33598</b>																										
2. Principal Place of Business <b>3229 SE 24th Street</b> Suite, Apt. #, etc.		3. Mailing Address <b>3229 SE 24th Street</b> Suite, Apt. #, etc.																											
City & State <b>Ruskin, FL</b>		City & State <b>Ruskin, FL</b>																											
Zip <b>33570</b>	Country <b>USA</b>	Zip <b>33570</b>	Country <b>USA</b>	4. FEI Number <b>51-0453846</b>																									
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent <b>DURRANCE, WILLIAM A 1920 LIGHTFOOT ROAD WIMAUMA, FL 33598</b>				7. Name and Address of New Registered Agent Name <b>William A. Durrance</b> Street Address (P.O. Box Number is Not Acceptable) <b>3229 SE 24th Street</b> City <b>Ruskin</b>																									
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 <u>William A. Durrance</u> DATE <u>3/30/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">DPST</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>DURRANCE, WILLIAM A</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1920 LIGHTFOOT ROAD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WIMAUMA, FL 33598</td> <td></td> </tr> </table>			TITLE	DPST	<input type="checkbox"/> Delete	NAME	DURRANCE, WILLIAM A		STREET ADDRESS	1920 LIGHTFOOT ROAD		CITY-ST-ZIP	WIMAUMA, FL 33598		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">DPST</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>William A. Durrance</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3229 SE 24th Street</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>Ruskin, FL 33570</td> <td></td> </tr> </table>			TITLE	DPST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	William A. Durrance		STREET ADDRESS	3229 SE 24th Street		CITY-ST-ZIP	Ruskin, FL 33570	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.																													
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