

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088687

Entity Name: DUVALIMITED, INC.

FILED
Aug 24, 2004
Secretary of State

Current Principal Place of Business:

1833 HENDRY ST.
FT. MYERS, FL 33902

New Principal Place of Business:

2709 ESTERO BLVD
FORT MYERS BEACH, FL 33931

Current Mailing Address:

P. O. DRAWER 1507
FT. MYERS, FL 33902

New Mailing Address:

2709 ESTERO BLVD
FORT MYERS BEACH, FL 33931

FEI Number: 20-0161018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNELL, MARY V ESQ.
1833 HENDRY ST.
FT. MYERS, FL 33902

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUVAL, CHRISTOPHER M
Address: 916 INDIAN TRAIL
City-St-Zip: MARTINSVILLE, VA 241125330

Title: VD () Delete
Name: DUVAL, PAUL A
Address: 5 MANARD CT.
City-St-Zip: GREENSBORO, NC 274075330

Title: STD () Delete
Name: DUVAL, JAYE R
Address: 916 INDIAN TRAIL
City-St-Zip: MARTINSVILLE, VA 241125330

Title: D () Delete
Name: DUVAL, MADELINE F
Address: 5 MANARD CT.
City-St-Zip: GREENSBORO, NC 27407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUVAL, CHRISTOPHER M
Address: 2709 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

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

Title: STD (X) Change () Addition
Name: DUVAL, JAYE R
Address: 2709 ESTERO BLVD
City-St-Zip: FORT MYERS BEACH, FL 33931

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER M DUVAL

PD

08/24/2004

Electronic Signature of Signing Officer or Director

Date