
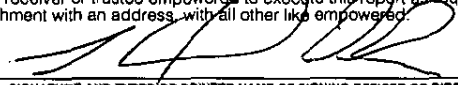


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P92000015143		
1. Entity Name HOWARD DURDEN SURVEYOR, INC.		
Principal Place of Business 4075 OLD NORTH HIGHWAY 19 MOUNT DORA, FL 32757 US		Mailing Address P.O. BOX 1245 TAVARES, FL 32778 US
DO NOT WRITE IN THIS SPACE		
		07072006 No Chg-P CR2E034 (11)
		4. FEI Number 59-3157728
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Fee Re
6. Name and Address of Current Registered Agent HOWARD, DURDEN 4075 OLD NORTH HIGHWAY 19-A MOUNT DORA, FL 32757		DO NOT WRITE IN THIS SPACE
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 the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>07/11/06</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		In accordance with s. 607.193(2) corporation did not receive the p
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DURDEN, HOWARD 4075 NORTH HW 19-A EUSTIS, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 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 changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 		Date <u>7/7/06</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Ph