

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000003591

1. Entity Name

DURANGO U.S.A., INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90006 042 ***150.00

Principal Place of Business Mailing Address
2325 ULMERTON ROAD 2325 ULMERTON ROAD
SUITE 20 SUITE 20
CLEARWATER FL 34622 CLEARWATER FL 33762-3373
US US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3222897

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORRIS, GREGORY D
2325 ULMERTON ROAD
SUITE 20
CLEARWATER FL 34622 33762

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code 33762

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DC
NAME BULLARD, FRED B., JR.
STREET ADDRESS 2325 ULMERTON ROAD SUITE 20
CITY-ST-ZIP CLEARWATER FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DS
NAME BULLARD, KAROL K.
STREET ADDRESS 2325 ULMERTON ROAD SUITE 20
CITY-ST-ZIP CLEARWATER FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS
NAME MORRIS, GREGORY D
STREET ADDRESS 2325 ULMERTON ROAD SUITE 20
CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MCNELL, CLAYTON
STREET ADDRESS 2325 ULMERTON ROAD SUITE 20
CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DP
NAME WALKER, MITCH
STREET ADDRESS 235 ULMERTON RD STE 20
CITY-ST-ZIP CLEARWATER FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MCNELL, VAN
STREET ADDRESS 2325 ULMERTON RD STE 20
CITY-ST-ZIP CLEARWATER FL 33762 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/00

Date

727-576-6424

Daytime Phone #