

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 02, 2006 8:00 am**  
**Secretary of State**

02-02-2006 90040 032 \*\*\*150.00

**DOCUMENT # P94000077271**

1. Entity Name  
CHC DURHAM MANAGEMENT CORP.



Principal Place of Business

3250 MARY ST  
SUITE 500  
MIAMI, FL 33133

Mailing Address

3250 MARY ST  
SUITE 500  
MIAMI, FL 33133

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092006

Chg-P

CR2E034 (11/05)

4. FEI Number

65-0536519

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

PELTZ, ARVIN  
3250 MARY ST  
SUITE 500  
MIAMI, FL 33133

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DCP ☐ Delete  
NAME WEISER, SHERWOOD M  
STREET ADDRESS 3250 MARY STREET, SUITE 500  
CITY-ST-ZIP MIAMI, FL 33133

TITLE DVCA ☐ Delete  
NAME LEFTON, DONALD E  
STREET ADDRESS 3250 MARY ST, SUITE 500  
CITY-ST-ZIP MIAMI, FL 33133

TITLE VS ☐ Delete  
NAME HEWITT, THOMAS F  
STREET ADDRESS 3250 MARY STREET, SUITE 500  
CITY-ST-ZIP MIAMI, FL 33133

TITLE V ☐ Delete  
NAME SIBLEY, PETER L  
STREET ADDRESS 3250 MARY ST SUITE 500  
CITY-ST-ZIP MIAMI, FL 33133

TITLE VST ☐ Delete  
NAME TEMLING, W P  
STREET ADDRESS 3250 MARY ST SUITE 500  
CITY-ST-ZIP MIAMI, FL 33133

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE ☐ Change ☐ Addition  
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 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.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHERWOOD M. WEISER 1/31/2006 305-445-2493

Date

Daytime Phone #