

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000073014 (9)

1. Corporation Name

DURRANCE INVESTMENTS, INC.



Principal Place of Business

Mailing Address

1336 HOMESTEAD RD. NORTH  
LEHIGH ACRES FL 33936

1336 HOMESTEAD RD. NORTH  
LEHIGH ACRES FL 33936

3. Date Incorporated or Qualified

3a. Date of Last Report

09/19/1995

4. FEI Number

Applied For

Not Applicable

450617169

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes ☒ No ☐

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACBETH, J. ROSS  
2543 U.S. 27 SOUTH  
SEBRING FL 33870

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed in Block 12 or Block 13 of registered agent and the corporation.

(NOTE: Registered Agent's signature required when reappointing.)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President  
NAME SHARON Y. DURRANCE  
STREET ADDRESS 5280 RIVER BLOSSOM LANE  
CITY-ST-ZIP Labelle, ALVA, FL. 33920

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1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

1. TITLE

2. NAME

23. STREET ADDRESS

2.4. CITY-ST-ZIP

3.1. TITLE

3.2. NAME

3.3. STREET ADDRESS

3.4. CITY-ST-ZIP

4.1. TITLE

4.2. NAME

4.3. STREET ADDRESS

4.4. CITY-ST-ZIP

5.1. TITLE

5.2. NAME

5.3. STREET ADDRESS

5.4. CITY-ST-ZIP

6.1. TITLE

6.2. NAME

6.3. STREET ADDRESS

6.4. CITY-ST-ZIP

200001923382

-08/15/96--01068--011

\*\*\*225.00

SIGNATURE:

Sharon Y. Durrance

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHARON Y. DURRANCE

8-5-96

941-874-1982

Date

Typed Name

CR2E034 (3/96)