

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000011677

1. Entity Name

DUVAL INVESTMENTS, INC.

FILED

01 MAY -7 AM 11: 34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

11983 TAMiami TRAIL N
SUITE 100
NAPLES FL 34110

Mailing Address

2338 IMMOKALEE RD., #101
NAPLES FL 34110

2. Principal Place of Business

2338 Immokalee Rd

3. Mailing Address

Suite, Apt. #, etc.

101

State, Apt. #, etc.

City & State

Naples 34110

City & State

Zip
Florida

Country
USA

Zip

Country

4. FEI Number 65-0847319

Applied For
(Not Applicable)

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name Valerie Hulme
Street Address (P.O. Box Number is Not Acceptable)
2338 Immokalee Road
#101
City Naples FL Zip Code 34110

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

Valerie Hulme

Signature of individual or corporate name of registered agent and title (applicable)

(If the Registered Agent's signature is required when filing)

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 Max Fee
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
P	HULME, VALERIE	2338 IMMOKALEE RD SUITE 101	NAPLES FL 34110	
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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-05/18/01 -01083 -01
****150.00 Change ****

SP

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:

Valerie Hulme
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01 941-594-5400

Expiring 12/31/01