## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 05, 2005 8:00 am Secretary of State DOCUMENT # P97000023399 04-05-2005 90058 007 \*\*\*150.00 DURÁBLE INVESTMENTS, INC. Mailing Address Principal Place of Business 40047524 8210 LAKEWOOD RANCH BLVD. 8210 LAKEWOOD RANCH BLVD. BRADENTON, FL 34202 BRADENTON, FL 34202 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite. Apt. #, etc. CR2E034 (10/03) 02212005 Applied For City & State City & State 4. FEI Number 65-0758751 Not Applicable Zin Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HEIM, PRISCILLA G Street Address (P.O. Box Number is Not Acceptable) 8210 LAKEWOOD RANCH BLVD. BRADENTON, FL 34202 Zip Code FI 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. П Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DPTA TITLE ☐ Delete TITLE ☐ Addition SCHIER, JAMES R NAME NAME 8210 LAKEWOOD RANCH BLVD. STREET ADDRESS STREET ADDRESS BRADENTON, FL 34202 CITY-ST-78 CITY-ST-ZIP DVPA TITLE TITLE Change Addition Delete NAME TINDAL, STEVEN L NAME STREET ADDRESS 3711 CORTEZ ROAD WEST SUITE 300 STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34210 CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition HEIM, PRISCILLA G NAME NAME 8210 LAKEWOOD RANCH BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34202 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE \_\_\_ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

**FILED** 

12. 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 yet rustee 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 attachinent wil