

SECOND ANNUAL REPORT. CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION  
ANNUAL REPORT



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

FILED  
Sep 28 1998 8:00am  
Secretary of State

DOCUMENT # **P97000041491 (6)**

1. Corporation Name

**DURANGO OF DALE MABRY, INC.**

Principal Place of Business

**2325 ULMERTON ROAD, SUITE 20  
CLEARWATER FL 33762**

Mailing Address

**2325 ULMERTON ROAD, SUITE 20  
CLEARWATER FL 33762**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**05/05/1997**

4. FEI Number

**59-3447416**

Applied For

Not Applicable

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

**PARRY, EDWARD H  
2325 ULMERTON ROAD, SUITE 20  
CLEARWATER FL 33762**

10. Name and Address of New Registered Agent

81 Name

**GREGORY D. MORRIS**

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

**4702 HENRY AVE**

83

**TAMPA**

84 City

**TAMPA**

**FL**

85 Zip Code

**33624**

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 *Ed Parry*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **BULLARD, FRED B JR.**  
STREET ADDRESS **2325 ULMERTON ROAD, SUITE 20**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **PD** ☐ DELETE

NAME **WALKER, MITCHELL J**  
STREET ADDRESS **2325 ULMERTON ROAD, SUITE 20**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **VD** ☒ DELETE

NAME **PARRY, EDWARD H**  
STREET ADDRESS **2325 ULMERTON ROAD, SUITE 20**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **SD** ☐ DELETE

NAME **BULLARD, KAROL K**  
STREET ADDRESS **2325 ULMERTON ROAD, SUITE 20**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE **S** ☐ DELETE

NAME **DERRY, REBECCA J**  
STREET ADDRESS **2325 ULMERTON ROAD, SUITE 20**  
CITY-ST-ZIP **CLEARWATER FL 33762**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **VICE-PRESIDENT** ☐ Change ☒ Addition

1.2 NAME **GREGORY D MORRIS**  
1.3 STREET ADDRESS **4702 HENRY AVE**  
1.4 CITY-ST-ZIP **TAMPA FLA 33624**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Ed Parry*

*2/5/98*

*817-526-1424*

CR2E034 (5/98)