

SECOND AMOUNT CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
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
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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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

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

81 Name

GREGORY D. MORRIS

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

4702 NORTH AVE

83

84 City

TAMPA

85 Zip Code

FL 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE	1.1 TITLE	VICE - PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BULLARD, FRED B JR.		1.2 NAME	GREGORY D MORRIS	
STREET ADDRESS	2325 ULMERTON ROAD, SUITE 20		1.3 STREET ADDRESS	4702 NORTH AVE	
CITY-ST-ZIP	CLEARWATER FL 33762		1.4 CITY-ST-ZIP	TAMPA FL 33624	
TITLE	PD	<input type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALKER, MITCHELL J		2.2 NAME		
STREET ADDRESS	2325 ULMERTON ROAD, SUITE 20		2.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33762		2.4 CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARRY, EDWARD H		3.2 NAME		
STREET ADDRESS	2325 ULMERTON ROAD, SUITE 20		3.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33762		3.4 CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BULLARD, KAROL K		4.2 NAME		
STREET ADDRESS	2325 ULMERTON ROAD, SUITE 20		4.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 33762		4.4 CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DERRY, REBECCA J		5.2 NAME		
STREET ADDRESS	2325 ULMERTON ROAD, SUITE 20		5.3 STREET ADDRESS	9000002650539	
CITY-ST-ZIP	CLEARWATER FL 33762		5.4 CITY-ST-ZIP	-09/28/98-01118-007	
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	***550.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			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: *Mabry*

FILED

Sep 28 1998 8:00am
Secretary of State



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

\$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

10. Name and Address of New Registered Agent

CR2E034 (5/98)