

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90038 017 ***150.00

DOCUMENT # P98000006358

1. Entity Name

DURANGO STEAKHOUSE OF QUEEN'S HARBOUR, INC.



Principal Place of Business

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

Mailing Address

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



01232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3487922

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MORRIS, GREG
2325 ULMERTON RD STE 20
CLEARWATER, FL 33762**

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

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

TITLE: D
NAME: MCNEEL, VAN L
STREET ADDRESS: 5401 WEST KENNEDY BLVD SUITE 751
CITY-ST-ZIP: TAMPA, FL 33609

TITLE: DST
NAME: MORAKS, GREGORY D
STREET ADDRESS: 2325 ULMERTON RD STE 20
CITY-ST-ZIP: CLEARWATER, FL 33762

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

**DO NOT WRITE
IN THIS SPACE**

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 or trustee 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 attachment with an address, with all other like empowered.

SIGNATURE: *VP*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/02/04
Date

727-576-6424
Daytime Phone #