

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V54490** (0)

1. Corporation Name

DURANGO STEAKHOUSE OF CLEARWATER, INC.



Principal Place of Business

**2575 ULMERTON ROAD
SUITE 300
CLEARWATER FL 34622**

Mailing Address

**2575 ULMERTON ROAD
SUITE 300
CLEARWATER FL 34622**

3. Date Incorporated or Qualified
07/27/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 **2325 Ulmerton Road**

26 **2325 Ulmerton Road**

4. FEI Number
59-3171974

Applied For
Not Applicable

22 Suite, Apt. #, etc.
Suite 20

27 Suite, Apt. #, etc.
Suite 20

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **Clearwater, Florida**

28 **Clearwater, Florida**

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24 **34622**

25 **Pinellas**

29 **34622**

30 **Pinellas**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PERRY, EDWARD
2575 ULMERTON RD
STE. 300
CLEARWATER FL 34622**

81 Name
Parry, Edward H.

82 Street Address (P.O. Box Number is Not Acceptable)
2325 Ulmerton Road

83 Suite 20

84 City
Clearwater

FL 85 Zip Code
34622

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

Edward H. Parry

Edward H. Parry

VP

4/16/96

Signature typed or printed name of registered agent, if not applicable

Signature typed or printed name of new registered agent, if not applicable

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☒ DELETE
NAME **TERRELL, LARRY**
STREET ADDRESS **2575 ULMERTON RD. STE. 300**
CITY-ST-ZIP **CLEARWATER FL 34622**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

DP ☐ Change ☒ Addition
Bullard, Fred B. Jr.
2325 Ulmerton Road, Suite 20
Clearwater, FL 34622

TITLE **DS** ☐ DELETE
NAME **BULLARD, KAROL K.**
STREET ADDRESS **2575 ULMERTON RD #300**
CITY-ST-ZIP **CLEARWATER FL**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☒ Change ☐ Addition
2325 Ulmerton Road, Suite 20
Clearwater, FL 34622

TITLE **DST** ☐ DELETE
NAME **PARRY, EDWARD H.**
STREET ADDRESS **2575 ULMERTON RD STE. 300**
CITY-ST-ZIP **CLEARWATER FL 34622**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☒ Change ☐ Addition
DVPT
2325 Ulmerton Road, Suite 20
Clearwater, FL 34622

TITLE **D** ☒ DELETE
NAME **TERRELL, JUDY L**
STREET ADDRESS **2575 ULMERTON RD. STE. 300**
CITY-ST-ZIP **CLEARWATER FL 34622**

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☒ Addition
AS
Derry, Rebecca
2325 Ulmerton Road, Suite 20
Clearwater, FL 34622

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, on an attachment with an address.

SIGNATURE:

Edward H. Parry

Edward H. Parry

VP

4/16/96

813-576-6424

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)