

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

0527018

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F98000006024

1. Corporation Name
DURAND FORMS INC.

Principal Place of Business: **9026 EAST LANSING RD. DURAND MI 48429**
 Mailing Address: **9026 EAST LANSING RD. DURAND MI 48429**

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83 City	

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 of agent

(NOTE: Registered Agent Signature is not required for this filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	[] DELETE
NAME	GEOFFREY, DAVID	
STREET ADDRESS	2571 SOUTH SHORE DRIVE	
CITY-ST-ZIP	FLUSHING MI	
TITLE	V	[] DELETE
NAME	VANLOON, MICHAEL	
STREET ADDRESS	4748 GREGORY RD.	
CITY-ST-ZIP	GOODRICH MI	
TITLE	CD	[] DELETE
NAME	GREENBERG, RUSSELL	
STREET ADDRESS	1270 AVENUE OF THE AMERICAS STE 2410	
CITY-ST-ZIP	NEW YORK NY	
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[] Change [] Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	[] Change [] Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[] Change [] Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[] Change [] Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[] Change [] Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[] Change [] Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/29/1998**

4. FEI Number: **13-3907692** 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 the current year Intangible Personal Property Tax: Yes No

10. Name and Address of New Registered Agent

200002770812--0
 -02/09/99--01193--020
 ****150.00 ****150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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, with all other like empowered

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-99 517 288 2626

CR2E034 (11/98)