


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91005 020 ****61.25

DOCUMENT # 755788					
1. Entity Name BANANA BAY CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1980 N. ATLANTIC AVE. SUITE 701 COCOA BEACH, FL 32931 US		Mailing Address 1980 N. ATLANTIC AVE. SUITE 701 COCOA BEACH, FL 32931 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Zip		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DAVIS, PETEY 1980 N. ATLANTIC AVE. SUITE 701 COCOA BEACH, FL 32931				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	SD <input checked="" type="checkbox"/> Delete	TITLE	V. P. - D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	MULHOLLAND, LAURA	NAME	Julia Black		
STREET ADDRESS	200 S. BANANA RIVER BLVD. #1804	STREET ADDRESS	200 S. Banana Blvd #103		
CITY-ST-ZIP	COCOA BEACH, FL 32931	CITY-ST-ZIP	Cocoa Beach, FL 32931		
TITLE	PD <input type="checkbox"/> Delete	TITLE	Sec. D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	PETERSON, BARBARA	NAME	Charles Randy		
STREET ADDRESS	200 S BANANA RIVER BLVD #2302	STREET ADDRESS	200 S. Banana Blvd # 2323		
CITY-ST-ZIP	COCOA BEACH, FL 32931	CITY-ST-ZIP	Cocoa Beach, FL 32931		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HOOVER, CLYDE	NAME			
STREET ADDRESS	200 S. BANANA RIVER BLVD. #1304	STREET ADDRESS			
CITY-ST-ZIP	COCOA BEACH, FL 32931	CITY-ST-ZIP			
TITLE	DVP <input type="checkbox"/> Delete	TITLE		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SULBER, BARBARA	NAME	Barbara Salber		
STREET ADDRESS	200 S. BANANA RIVER BLVD. #1604	STREET ADDRESS			
CITY-ST-ZIP	COCOA BEACH, FL 32931	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	NISHIMURA, IRENE	NAME			
STREET ADDRESS	200 S BANANA RIVER BLVD 2312	STREET ADDRESS			
CITY-ST-ZIP	COCOA BEACH, FL 32931	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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 617, 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: _____		4/19/04		321-784-2091	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	