

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000138030

1. Entity Name
BANNON ISLAND, INC.



FILED
Aug 04, 2008 08:00 AM
Secretary of State

Principal Place of Business
**7970 BANNON FISH CAMP ROAD
HAINES CITY, FL 33844**

Mailing Address
**7970 BANNON FISH CAMP ROAD
HAINES CITY, FL 33844**



07152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 30-0286798	Applied For Not Applicable
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5. Certificate of Status Desired. **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**O'LEARY, EILEEN A
7970 BANNON FISH CAMP ROAD
HAINES CITY, FL 33844**

**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: *Eileen A. O'Leary* **EILEEN A. O'LEARY** 7/14/2008
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
Due by September 12, 2008**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	O'LEARY, JAMES P
STREET ADDRESS	PO BOX 3323
CITY-ST-ZIP	HAINES CITY, FL 33845
TITLE	D
NAME	O'LEARY, EILEEN A
STREET ADDRESS	7970 BANNON FISH CAMP ROAD
CITY-ST-ZIP	HAINES CITY, FL 33844
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/04/08-80004-002 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Eileen A. O'Leary* **EILEEN A. O'LEARY** 7/14/2008 (863) 422-1223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #