## 2007 FOR PROFIT CORPORATION ANNUAL REPORT. **DOCUMENT #448830** 1. Entity Name BANYAN GROVE, INC. Principal Place of Business Mailing Address 1519 19TH PLACE PO BOX 998 VERO BEACH, FL 32961-0998 VERO BEACH, FL 32960 01052007 DO NOT WRITE IN THIS SPACE 4. FEI Number 59-1530875 6. Name and Address of Current Registered Agent GRAVES, W.C. III 5680 4TH ST VERO BEACH, FL 32968

## **FILED** Jan 30, 2007 08:00 AM Secretary of State

No Chg-P

CR2E034 (11/05)

Applied Fo Not Applic

5. Certificate of Status Desired

\$8.75 Additional Fee Required

## 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 accepted about 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 NOWI!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			, -		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAVES, FRANCES ELLIS 5680 4TH STREET VERO BEACH, FL 32968						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAVES, W.C., III 5680 4TH STREET VERO BEACH, FL 32968			000000611211 02/02/07-80054-003 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GRAVES, W C IV 6655 8TH ST VERO BEACH, FL 32968				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRAVES, W.C. IV 6655 8TH ST VERO BEACH, FL 32968			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP						·	

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 informati-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 direct 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: