

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90106 004 ***163.75

DOCUMENT # 524295	
1. Entity Name MARK BANE REALTY, INC.	

Principal Place of Business P.O. BOX 3829 TALL. FL 32303	Mailing Address P.O. BOX 3829 TALL. FL 32303
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50050597



1st MOORE CR2E034 (10/04)

2. Principal Place of Business DR. 5101 NORTH LAGOON DRIVE	3. Mailing Address 5101 NORTH LAGOON DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State PANAMA CITY BEACH, FL.	City & State PANAMA CITY BEACH, FL.
Zip 32408	Zip 32408
Country BA4	Country BA4

4. FEI Number 59-1718924	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BANE, MARK C III 1904 W NELSON CIR TALLAHASSEE FL 32303	
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7. Name and Address of New Registered Agent Name MARK C. BANE III Street Address (P.O. Box Number is Not Acceptable) 5101 NORTH LAGOON DRIVE City PANAMA CITY BEACH FL Zip Code 32408	
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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. Mark C. Bane III SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE 4/29/05
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FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BANE, MARK C III 1904 W NELSON CIR TALL. FL 32303 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BANE, MARK C JR 1904 W. NELSON CIR TALLAHASSEE FL 32303 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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: Mark C. Bane III SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: 4/29/05 DAYTIME PHONE #: 850-933-0600