2010 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 525133

1. Entity Name
BILLY BOWLEGS BANANA PATCH, INC.

FILED
10 MAY 17 PM 4:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
400 NORTH TAMIAMI TRAIL SARASOTA FL 34236-4822 US	POB 7241 SARASOTA FL 34278-7241 US

1st MOORE CR2E034 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2140443 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BENJAMIN, GRACE 2970 BAHIA VISTA ST SARASOTA FL 34239	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee Will Be $550.00
Make Check Payable to Florida Department of State

nancing ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	11. OFFICERS AND DIRECTORS IN 11
TITLE P ☐ Delete NAME BENJAMIN, GRACE STREET ADDRESS 2970 BAHIA VISTA ST CITY-ST-ZIP SARASOTA FL 34239	☐ Change ☐ Addition
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05/17/10--01005--015 **150.00

MAY 10, 2010

RE: BILLY BOWLEGS BANANA PATCH, INC.
DOUCUMENT # 525133

I DID NOT RECEIVE THE ANNUAL REPORT NOTICE OF THIS YEAR 2010

CHECK ENCL FOR $150.00

Grace Benjamin

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____ GRACE BENJAMIN, PRESIDENT MAY 10, 2010