

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 01, 2006
Secretary of State**

DOCUMENT# 734621

Entity Name: EASTBANK, INC.

Current Principal Place of Business:

525 N. HALIFAX AVE.
APT. 9
DAYTONA BEACH, FL 32118 US

New Principal Place of Business:

Current Mailing Address:

525 N. HALIFAX AVE.
APT. 9
DAYTONA BEACH, FL 32118 US

New Mailing Address:

FEI Number: 59-2601154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FELDMAN, SAUL
525 N HALIFAX DR #9
DAYTONA BCH, FL 32118 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: FELDMAN, SAUL
Address: 525 N HALIFAX 9
City-St-Zip: DAYTONA BEACH, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV () Delete
Name: ZEHRUNG, DONALD
Address: 525 N HALIFAX AVE #7
City-St-Zip: DAYTONA BEACH, FL 32118

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT () Delete
Name: MCKENDRICK, HE
Address: 525 N HALIFAX AVE #8
City-St-Zip: DAYTONA BEACH, FL 32118

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP () Delete
Name: VITALE, THOMAS
Address: 525 N HALIFAX 1
City-St-Zip: DAYTONA BEACH, FL 32118

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: KULZER, HEINRICH
Address: 525 N HALIFAX #10
City-St-Zip: DAYTONA BEACH, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: RIMOLA, ALFONSO
Address: 525 N HALIFAX AVE #10
City-St-Zip: DAYTONA BEACH, FL 32118

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAUL FELDMAN

DS

07/01/2006

Electronic Signature of Signing Officer or Director

Date