

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000564

Entity Name: THE B.N.K. CORPORATION

FILED
Jul 27, 2005
Secretary of State

Current Principal Place of Business:

274 WILSHIRE BLVD
245
CASSELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

274 WILSHIRE BLVD
245
CASSELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 59-3345448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BALDRIDGE, ORVILLE
1154 GALAHAD DR
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BALDRIDGE, MARY LOUISE
Address: 1154 GALAHAD DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: CPS () Delete
Name: BALDRIDGE, ORVILLE
Address: 1154 GALAHAD DR
City-St-Zip: CASSELBERRY, FL 32707

Title: T () Delete
Name: KOUGH, LAURA M
Address: 3128 NICHOLSON DR
City-St-Zip: WINTER PK, FL 32292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V.P. (X) Change () Addition
Name: BALDRIDGE, MARY LOUISE
Address: 1154 GALAHAD DRIVE
City-St-Zip: CASSELBERRY, FL 32707

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

Title: D (X) Change () Addition
Name: KOUGH, LAURA M
Address: 3128 NICHOLSON DR
City-St-Zip: WINTER PK, FL 32292

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ORVILLE BALDRIDGE

CPS

07/27/2005

Electronic Signature of Signing Officer or Director

_____ Date