

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2006 8:00 am**  
**Secretary of State**

04-28-2006 90211 021 \*\*\*150.00

**DOCUMENT # F96000006788**

1. Entity Name  
**BANYAN FINANCIAL SERVICES, INC.**



Principal Place of Business  
10275 COLLINS AVENUE  
SUITE #1531  
BAL HARBOUR, FL 33154

Mailing Address  
20533 BISCAYNE BOULEVARD  
SUITE #4-322  
MIAMI, FL 33180

**60031056**



2. Principal Place of Business

**20533 BISCAYNE BLVD**

3. Mailing Address

Suite-Apt. #, etc.

**SUITE 4-322**

Suite, Apt. #, etc.

03192006

Chg-P

CR2E034 (11/05)

4. FEI Number

**65-0747166**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CEO  
CHERRY, RICHARD  
10275 COLLINS AVENUE, SUITE 1531  
BAL HARBOUR, FL 33154 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
EVP  
NICHOLS, GAIL  
10275 COLLINS AVENUE, SUITE 1531  
BAL HARBOUR, FL 33154 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**20533 BISCAYNE BLVD** ☒ Change ☐ Addition  
**SUITE 4-322**  
**MIAMI, FL 33180**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**20533 BISCAYNE BLVD** ☒ Change ☐ Addition  
**SUITE 4-322**  
**MIAMI, FL 33180**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 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:

**GAIL NICHOLS**

**4/21/2006**

**305-936-0223**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #