

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005909

FILED
Apr 28, 2009
Secretary of State

Entity Name: BANNER COMMUNICATIONS, INC.

Current Principal Place of Business:

4509 NW 23RD AVENUE
SUITE 10
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

PO BOX 358625
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 23-7451680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KINCAID, JACK L SR.
4509 NW 23RD AVENUE
SUITE 10
GAINESVILLE, FL 32606 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

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: KINCAID, JACK L SR.
Address: 4509 NW 23RD AVENUE
City-St-Zip: GAINESVILLE, FL 32606

Title: CHM () Delete
Name: WASHINGTON, JOHN
Address: 102 SANDS DRIVE
City-St-Zip: FAIRMONT, WV 26554

Title: DST () Delete
Name: SHIPLEY, FRANK
Address: 306 ELM STREET
City-St-Zip: CLARKSBURG, WV 26301

Title: D () Delete
Name: FOMINKO, ANDREW
Address: 476 BROADWAY AVENUE
City-St-Zip: STAR CITY, WV 26505

Title: D () Delete
Name: DOAK, ROBERT
Address: 3011 NW 24TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JACK L. KINCAID, SR.

CP

04/28/2009

Electronic Signature of Signing Officer or Director

Date