


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90857 017 ***150.00

DOCUMENT # L48331

1. Entity Name
BANOV ARCHITECTS, P.A.



Principal Place of Business Mailing Address

~~2855 OCEAN DR., STE. C-6~~ ~~PO BOX 3628~~
~~PO BOX 3628~~ ~~VERO BEACH, FL 32064~~ US
VERO BEACH, FL 32963 US

40054010

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

2975 Twentieth St. **2975 Twentieth St.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Vero Beach, FL **Vero Beach, FL**
 Zip Country Zip Country

32960 **32960** **32960** **32960**



03062007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent

BANOV, AMY
~~2855 OCEAN DRIVE, STE C-6~~
~~VERO BEACH, FL 32963~~

7. Name and Address of New Registered Agent

Name **Banov, Amy**
 Street Address (P.O. Box Number is Not Acceptable)
2975 Twentieth St.
 City **Vero Beach** **FL** Zip Code **32960**

4. FEI Number Applied For

65-0170195 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BANOV, AMY 2855 OCEAN DR., STE. C-6 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST Banov, Amy 2975 Twentieth St. Vero Beach, FL 32960 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BANOV, ROBERT P. 2855 OCEAN DR., STE. C-6 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Banov, Robert P. 2975 Twentieth St. Vero Beach, FL 32960 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Amy Banov, Pres* **AMY BANOV, PRES** **712-299-6565**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #