

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004680

FILED  
Jul 17, 2006  
Secretary of State

Entity Name: EBAN, INC.

## Current Principal Place of Business:

905 TARA DE AVILA  
TAMPA, FL 336131047

## New Principal Place of Business:

16613 MILLAN DE AVILA  
TAMPA, FL 336131047

## Current Mailing Address:

905 TARA DE AVILA  
TAMPA, FL 336131047

## New Mailing Address:

16613 MILLAN DE AVILA  
TAMPA, FL 336131047

FEI Number: 20-2798990      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

PETITJEAN, CYNTHIA M.  
110 W. REYNOLDS ST., STE. 101  
PLANT CITY, FL 33563      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: D      ( ) Delete  
Name: SHERIDAN, MARY E.  
Address: 905 TARA DE AVILA  
City-St-Zip: TAMPA, FL 336131047

Title: D      ( ) Delete  
Name: CORRADIN, SILVIA MARISA  
Address: 4379 6TH ST. EAST  
City-St-Zip: LANCASTER, CA 93535

Title: D      ( ) Delete  
Name: GRUSCHOVNIK, GENA LUANN  
Address: 122 CHALET CRESCENT  
City-St-Zip: LONDON, ONTARIO, CANADA, N6 K3C6

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D      (X) Change ( ) Addition  
Name: SHERIDAN, MARY E.  
Address: 16613 MILLAN DE AVILA  
City-St-Zip: TAMPA, FL 336131047

Title: D      (X) Change ( ) Addition  
Name: CORRADIN, SILVIA MARISA  
Address: 45424 ROBINSON DRIVE  
City-St-Zip: LANCASTER, CA 93535

Title: D      (X) Change ( ) Addition  
Name: GIONFRIDDO, BRENDA  
Address: 165 HAMPDEN RD  
City-St-Zip: STAFFORD SPRINGS, CT 06076

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: MARYBETH SHERIDAN

D

07/17/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date