FILED Apr 20, 2006 8:00 am Secretary of State

2006 F	OR PROFII ANNUAL I	REPORT	N
			\neg

1. Entity Nam	OCUMENT # P0300065305 Entity Name ARSYN FINANCIAL GROUP, INC.						04-20-2006 9	-		
Principal Place	e of Busines:	S	Mailing Address		· · · · · · · · · · · · · · · · · · ·	400	54363			
1991 MAIN S Sarasota, F	STREET SUITE 283 1991 MAIN ST FL 34236 BOX 183 SARASOTA, FL 34236			*.				11 51(1) 51 (1) 6 1(1001 10 01	
2. Principal P	pal Place of Business 3. Mailing Address									
Suite, Apt.	t. #, etc. Suite, Apt. #, etc.				02172006	Chg-P	CR2E03	34 (11/05)		
City & State	e		City & State		4. FEI Number Applied For 55-0835379 Not Applicate					
Zip		Country	Zip	Cour	atry	5. Certificate of Status Desired \$8.75 Additional Fee Required				
· · · · · · · · · · · · · · · · · · ·	6. Name	and Address of Current F	Registered Agent		Name	7. Name and	Address of New Re	egistered A	gent	
BAND, STEVEN C 1991 MAIN STREET BOX 183			Street Address (P.O. Box Number is Not Acceptable)							
SARASOT	A, FL 342	236			City			FL	Zip Code	e
	named entit		the purpose of changing its	register	ed office or register	ed agent, or bo	th, in the State of Flor		amiliar with,	and accept
SIGNATURE_	.o.io or togic	arac agam.								ĺ
0.0.0.0.0.0	Signature, typed	or printed name of registered agent a	nd title if applicable. (NOT)	:: Registero	ed Agent signature required	(when reinstating)		DATE		
		FEE IS \$150.00 6 Fee will be \$550.0	9. Election Campa Trust Fund Cont	_	~ _ ~.	.00 May Be ed to Fees				
10.		OFFICERS AND I	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	CERS AND	DIRECTORS	S IN 11
TITLE NAME	DV Delete TITLE BAND, DAVID S			I				☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	240 SOUTH PINEAPPLE AVENUE 10TH FLOOR STREET			EET ADDRESS '-ST-ZIP						
TITLE				TITL	!				☐ Change	Addition
NAME STREET ADDRESS	BAND, STEVEN C NA 1991 MAIN ST BOX 183				EET ADDRESS					
CITY-ST-ZIP		TA, FL 34236		'-ST-ZIP						
TITLE NAME	DT LANDSM	AN, GARY	☐ Delete	TITL	1				Change	Addition
STREET ADDRESS CITY-ST-ZIP	1991 MAIN ST BOX 183				EET ADDRESS ST-ZIP					
TITLE			☐ Detete	TITL	E				☐ Change	☐ Addition
NAME STREET ADDRESS				NAM STRI	IE EET ADDRESS					
CITY-ST-ZIP				CITY	/-ST-ZIP					
TITLE NAME			☐ Delete	TITL NAM	i i				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP					EET ADORESS '-ST-ZIP					
TITLE			☐ Delete	TITE					☐ Change	Addition
STREET ADDRESS					EET ADORESS					
CITY-ST-ZIP 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. Steven C. Band. Director. 3/15/06										
SIGNATURE: Steven C. Band, Director 3/15/06 Date Dayline Priore #										