2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 06, 2005 8:00 am Secretary of State

1. Entity Name BANNISTER ENTERPRISES, INC.						04-06-2005	90100 0	06 13	0.00	
Principal Plac 5029 TAMIAI NAPLES, FL		Mailing Address 5029 TAMIAMI TRAIL E NAPLES, FL 34113-412	26							
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03282005	Chg-P	CR2E0	34 (10/03)		
City & Stat	8	City & State			4. FEI Number 13-4266				pplied For ot Applicable	
Zip	Country	Zip	Country		_5. Certificate o	f Status Desired		\$8.75 Add Fee Require		
	6. Name and Address of Current I	Registered Agent			7. Name and A	ddress of New R	egistered /	Agent		
KEATON	FARI F		Name							
KEATON, EARL F 1900 OAK DR ALVA, FL 33920			Street A	Street Address (P.O. Box Number is Not Acceptable)						
			City				FL	Zip Cod	е	
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										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financia Trust Fund Contribution.										
After Ma	ay 1, 2005 Fee will be \$550.0	Trust Fund Contrib		\$5. I Adde	00 May 8e ed to Fees					
After Ma	ay 1, 2005 Fee will be \$550.0 OFFICERS AND I	Trust Fund Contrit DIRECTORS	bution. 11.		ADDITIONS/C	HANGES TO OFF	ICERS AND	· K /		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 addless, with all other like empowered. SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR