

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000151916 1. Entity Name T.J. & J.V. BANDERMAN, INC.	
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Principal Place of Business 508 TIMBER LN TARPON SPRINGS FL 34689	Mailing Address 508 TIMBER LN TARPON SPRINGS FL 34689
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E034 (10/05)

City & State Zip	City & State Zip
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4. FEI Number 20-0817968	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applied
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6. Name and Address of Current Registered Agent BANDERMAN, JOYCE V 508 TIMBER LN TARPON SPRINGS FL 34689	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. **\$5.00** Max. Added to Fee

10. OFFICERS AND DIRECTORS	
TITLE	DPT <input type="checkbox"/> Delete NAME: BANDERMAN, JOYCE V STREET ADDRESS: 508 TIMBER LN CITY-ST-ZIP: TARPON SPRINGS FL 34689
TITLE	DVS <input type="checkbox"/> Delete NAME: BANDERMAN, TEDDY J STREET ADDRESS: 508 TIMBER LN CITY-ST-ZIP: TARPON SPRINGS FL 34689
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Joyce V. Banderman* **JOYCE V. BANDERMAN** 4-09-2006 727-786-199