


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90016 023 ***150.00

DOCUMENT # P04000114609	
1. Entity Name BANYAN REALTY MANAGEMENT, INC.	

Principal Place of Business 501 N. MAGNOLIA AVENUE ORLANDO, FL 32801 US	Mailing Address 1665 PALM BEACH LAKES BLVD WEST PALM BEACH, FL 33401 US
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2. Principal Place of Business - No P.O. Box # 707 MENDHAM BLVD Suite, Apt. #, etc. SUITE 201 City & State ORLANDO FL Zip 32825 Country USA	3. Mailing Address 707 MENDHAM BLVD Suite, Apt. #, etc. SUITE 201 City & State ORLANDO FL Zip 32825 Country USA
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02072007 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent LAGER, JILL M 1665 PALM BEACH LAKES BLVD #400 WEST PALM BEACH, FL 33401	
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7. Name and Address of New Registered Agent	
Name	LOUIS E. VOGT
Street Address (P.O. Box Number is Not Acceptable)	707 MENDHAM BLVD., SUITE 201
City	ORLANDO FL Zip Code 32825

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	LOUIS E. VOGT
Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)
	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D VOGT, LOUIS E 501 N. MAGNOLIA AVENUE ORLANDO, FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D VOGT, LOUIS E. 707 MENDHAM BLVD, SUITE 201 ORLANDO, FL 32825 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, V ZIMMERMAN, SCOTT 501 N. MAGNOLIA AVENUE ORLANDO, FL 32801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V, D ZIMMERMAN, SCOTT 707 MENDHAM BLVD, SUITE 201 ORLANDO, FL 32825 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V, S ALEX, KATHLEEN 250 AUSTRALIAN AVENUE, SUITE 1602 WEST PALM BEACH, FL 33401 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V, S ALEX, KATHLEEN 1665 PALM BEACH LAKES BLVD, #400 WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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
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
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.	
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SIGNATURE	By: LOUIS E. VOGT, Pres	DATE	407-377-0000
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