

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000114181

Entity Name: CABANAWAY CORPORATION

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

3119 S INDIAN RIVER DRIVE  
FORT PIERCE, FL 34982 US

## New Principal Place of Business:

5475 NE SAINT JAMES DRIVE  
#163  
PORT SAINT LUCIE, FL 34983 US

## Current Mailing Address:

PO BOX 12511  
FORT PIERCE, FL 349792511 US

## New Mailing Address:

5475 NE SAINT JAMES DRIVE  
#163  
PORT SAINT LUCIE, FL 34983 US

FEI Number: 20-3310752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIND, KAISA  
3119 S INDIAN RIVER DRIVE  
FORT PIERCE, FL 34982 US

## Name and Address of New Registered Agent:

LIND, KAISA  
5475 NE SAINT JAMES DRIVE  
#163  
PORT SAINT LUCIE, FL 34983 US

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: KAISA LIND

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LIND, KAISA  
Address: 3119 S INDIAN RIVER DRIVE  
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VP ( ) Delete  
Name: ORJALA, ROY J  
Address: 3119 S INDIAN RIVER DRIVE  
City-St-Zip: FORT PIERCE, FL 34982 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAISA LIND

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date