2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000056056					FIL			
1. Entity Name PINEY POINT PLANTATION, INC.					05 JUN - 3	AM 11: 07		
					SHIRETAR	Y fir time		
Principal Place of Business Mailing Address 1904 W. NELSON CIRCLE P.O. BOX 3829					TALLAHASS	Y UL JÍM SEE, FLORIDA		
TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303								
2. Principal Place of Business , , , , , , , , , , , , , , , , , ,								
Suite, Apt. #, etc.					A ININN 18111 NAILL NAILL ANILE	32:01 \$(60 0) 6 00) 0 60 0)	.II.B.) IB.B.)	
4				06032005	Chg-P	CR2E034 (10/03)		
SIN STATE MACITA BEALLY HE City & State				4. FEI Numb 59-319		<u> </u>	oplied For ot Applicable	
3241	18 Country SA	Zip	Country	5. Certificate	of Status Desired	S8.75 Add Fee Require		
6. Name and Address of Current Registered Agent 7. Name and Address of New-Registered Agent Name ALD C D ALC C								
BANE, MARK C III 1904 W. NELSON CIRCLE Street Address					(P.O. Box Number is Not Acceptable)			
TALLAHASSEE, FL 32303				9/ N. I AB	N. LABORN DR			
City PAN AMA NITH APAN FL 129991							7 / Q	
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								
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing Due by September 7, 2005 9. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.								
10.	OFFICERS AND DIRE	CTORS	11.	ADDITIONS,	 /CHANGES TO OFFIC	DERS AND DIRECTOR	S IN 11	
TITLE NAME	PD BANE, MARK C III	TITLE (PP MARK C.	BANG III	Change	☐ Addition		
STREET ADDRESS CITY-ST-ZIP	1904 W. NELSON CIRCLE TALLAHASSEE, FL 32303	STREET ADDRESS CITY-ST-ZIP	5 161 HAR	GOON DR.	32408			
TITLE	T	TITLE		0/17 ("	☐ Change	Addition		
NAME STREET ADDRESS	BANE, MARK C JR 1904 W. NELSON CIRCLE	NAME STREET ADDRESS						
CITY-ST-ZIP TITLE	TALLAHASSEE, FL 32303 CITY-ST					Change	☐ Addition	
NAME STREET ADDRESS		NAME STREET ADDRESS	ſ	10005 16/09/0501	596951	1 ⊁150.00		
CITY-ST-ZIP		, , , , , , , , , , , , , , , , , , , 	CITY-ST-ZIP		······································		. 100.00	
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE	7 2 7 2	☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS				}	
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP			☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			_ · · · •		
CITY-ST-ZIP			CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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 of 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.								
6 (1/W/2 / 1/4 / 1/1) (17/0F								
SIGNATURE: SIGNATURE AND TYPED OR DESIGNED WARD OF SURVING DESIGNED OR DIRECTOR								