

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90358 045 ***150.00

DOCUMENT # P95000089814

1. Entity Name
BANYAN REAL ESTATE INC.



Principal Place of Business

Mailing Address

~~5414 GEORGIA AVE.~~
WEST PALM BEACH, FL 33405

~~5414 GEORGIA AVE.~~
WEST PALM BEACH, FL 33405

2. Principal Place of Business

3. Mailing Address

5108 SESAME STREET

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PALM BEACH GARDENS, FL

Zip

Country

Zip

Country

33418 PALM BEACH

04122006

Chg-P

CR2E034 (11/05)

4. FEI Number

65-0620000

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KENDALL, GARY D

~~5414 GEORGIA AVE.~~
WEST PALM BEACH, FL 33405

Name

SAME

Street Address (P.O. Box Number is Not Acceptable)

5108 SESAME STREET

PALM BEACH GARDENS

FL

Zip Code

33418

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

Gary D Kendall

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-13-06

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME KENDALL, GARY D
STREET ADDRESS 5414 GEORGIA AVE.
CITY-ST-ZIP WEST PALM BEACH, FL 33405

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☐ Delete
NAME KENDALL, GARY D
STREET ADDRESS 5414 GEORGIA AVENUE
CITY-ST-ZIP WEST PALM BEACH, FL 33405

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Gary D Kendall ORIGINAL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-13-06 561-719-8475

Date

Daytime Phone