

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000042977

1. Entity Name

BANANA CABANNA ACADEMY, INC.



Principal Place of Business

22673 PIECES OF EIGHT RD
CUDJOE KEY, FL 33042

Mailing Address

22673 PIECES OF EIGHT RD
CUDJOE KEY, FL 33042



01122006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0667914** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

ERSKINE, LARRY R ESQ.
29872 OVERSEAS HWY.
SUITE 1
BIG PINE KEY, FL 33043

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IN THIS SPACE**

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
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000392931
01/24/06-80099-019 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KLOZA, SANDRA A
STREET ADDRESS	20 CACTUS DR
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	VD
NAME	KLOZA, KENNETH F
STREET ADDRESS	20 CACTUS DR
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	SEC
NAME	DEMONCH, SUSAN
STREET ADDRESS	22673 PIECES OF EIGHT RD
CITY-ST-ZIP	CUDJOE KEY, FL 33042
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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:

Kenneth F. Kloza **Kenneth F. Kloza** 1-17-06 305-296-6611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #