

**2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Feb 02, 2006 8:00 am**  
**Secretary of State**

02-02-2006 90077 025 \*\*\*150.00



**DOCUMENT # P97000095506**

1. Entity Name

NO-1-U-NO, INC.

Principal Place of Business

200 SOLANA RD  
 PONTE VEDRA BEACH FL 32082

Mailing Address

POST OFFICE BOX 757  
 PONTE VEDRA FL 32004



2. Principal Place of Business

111 SOLANA ROAD

3. Mailing Address

Suite, Apt. #, etc.  
 1-B

City & State

Ponte Vedra Bch FL

City & State

City & State

4. FEI Number

59-3479995

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

BANYAS, WAINE M  
 200 SONAR RD  
 PONTE VEDRA BEACH FL 32082

7. Name and Address of New Registered Agent

Name

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

111 SOLANA ROAD

Suite 1B

City

Ponte Vedra Bch

FL

Zip Code

32082

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

1-23-2006

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BANYAS, W M	615 A1A NORTH #102	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
SD	GRESENS, RICHARD	615 A1A NORTH #102	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
TD	PEASLEE, READ	615 A1A NORTH #102	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
SAME	SAME	111 SOLANA ROAD Suite 1B	PONTE VEDRA Bch FLA 32082	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SAME	SAME	111 SOLANA ROAD Suite 1B	PONTE VEDRA Bch FLA 32082	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SAME	SAME	111 SOLANA ROAD Suite 1B	PONTE VEDRA Bch FLA 32082	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Waine Banyas*

1-23-2006

Date

9042735774

Daytime Phone #