

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J49181

FILED
Jan 05, 2005
Secretary of State

Entity Name: BAYWOOD TECHNOLOGIES, INC.

Current Principal Place of Business:

8505 BAYCENTER ROAD
3RD FLOOR
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8505 BAYCENTER ROAD
3RD FLOOR
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-2751509 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT, ABRAHAM, REITER & MCCORMICK P.A.
SUITE 2750
50 NORTH LAURA STREET
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: FITZGERALD, WILLIAM D
Address: 9428 BAYMEADOWS ROAD., STE 580
City-St-Zip: JACKSONVILLE, FL 32256

Title: D () Delete
Name: ROSS, KIMBALL K
Address: 770 W. GRANADA BLVD., STE. 309
City-St-Zip: ORMOND BEACH, FL 32174

Title: D (X) Delete
Name: GREEN, GLEN
Address: 9428 BAYMEADOWS ROAD STE 580
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FITZGERALD, WILLIAM D
Address: 8505 BAYCENTER ROAD, 3RD FLOOR
City-St-Zip: JACKSONVILLE, FL 32256

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 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 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: WILLIAM D FITZGERALD

P

01/05/2005

Electronic Signature of Signing Officer or Director

_____ Date