

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 16, 2007
Secretary of State**

DOCUMENT# N97000000521

Entity Name: BARRY TELECOMMUNICATIONS, INC.

Current Principal Place of Business:

3401 SOUTH CONGRESS AVENUE
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

ATTN B HENNEBERG
3401 SOUTH CONGRESS AVENUE
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 65-0728353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BURT, FRANK
777 BRICKELL AVENUE
SUITE 500
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: CT () Delete
Name: BEVILACQUA, LINDA
Address: 3401 SOUTH CONGRESS AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: T () Delete
Name: CZERNIEC, TIM
Address: 3401 SOUTH CONGRESS AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: ST (X) Delete
Name: ALBERT, PEG
Address: 3401 SOUTH CONGRESS AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: P () Delete
Name: CARR, JERRY
Address: 3401 SOUTH CONGRESS AVENUE
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNARD E. HENNEBERG

VP

01/16/2007

Electronic Signature of Signing Officer or Director

_____ Date