

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013913

FILED
Apr 04, 2005
Secretary of State

Entity Name: BROKER ASSOCIATION MANAGEMENT, INC.

Current Principal Place of Business:

14110 PERDIDO KEY DR SUITE G-2
PENNSACOLA, FL 32507

Current Mailing Address:

14110 PERDIDO KEY DR SUITE G-2
PENNSACOLA, FL 32507

New Principal Place of Business:

14118 PERDIDO KEY DR
#4
PENSACOLA, FL 32507

New Mailing Address:

14118 PERDIDO KEY DR
#4
PENSACOLA, FL 32507

FEI Number: 63-0865579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGERS, SALLY
14180 RIVER ROAD
#5
PENNSACOLA, FL 32507 US

Name and Address of New Registered Agent:

ROGERS, SALLY
14180 RIVER ROAD
#5
PENSACOLA, FL 32507 US

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:

04/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROGERS, SALLY
Address: 14180 RIVER ROAD #5
City-St-Zip: PENNSACOLA, FL 32507

Title: D () Delete
Name: LAGMAN, EDWARD C
Address: 3315 DEMETROJIOUS RD.
City-St-Zip: PENNSACOLA, FL 325031042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ROGERS, SALLY
Address: 14180 RIVER ROAD #5
City-St-Zip: PENSACOLA, FL 32507

Title: D (X) Change () Addition
Name: LAGMAN, EDWARD C
Address: 3315 DEMETROJIOUS RD.
City-St-Zip: PENSACOLA, FL 325031042

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: SALLY ROGERS

D

04/04/2005

Electronic Signature of Signing Officer or Director

Date