## 2008 FOR PROFIT CORPORATION

## Mar 07, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # F03000004021 BARRON VENTURES, INC. Principal Place of Business Mailing Address 2502 AVENUE B 2502 AVENUE B BRADENTON BEACH, FL 34217 BRADENTON BEACH, FL 34217 01072008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 34-1635382 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BARRON, DENNIS H 2502 AVENUE B BRADENTON BEACH, FL 34217 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, typed or printed name of registered agent and title 4 applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000850407 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 03/24/08-80006-002 150.00 10. OFFICERS AND DIRECTORS TITLE NAME BARRON, DENNIS H STREET ADDRESS 2502 AVENUE B CITY-ST-ZiP BRADENTON BEACH, FL 34217 TITLE ROGERS-BARRON, SHARON NAME STREET ADDRESS 2502 AVENUE B CITY-ST-ZIP BRADENTON BEACH, FL 34217 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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 time empowered.

SIGNATURE:

CITY-ST-ZIP

NAME STREET ADDRESS

FILED