2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F27998

Entity Name: BAYSIDE MANAGEMENT, INC.

FILED Aug 23, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

521 GOLF TEE LANE 2811 CITRON DR.

APT. # 105 LONGWOOD, FL 32779 LONGWOOD, FL 32779

Current Mailing Address: New Mailing Address:

521 GOLF TEE LANE 2811 CITRON DR.

APT # 105 LONGWOOD, FL 32779 LONGWOOD, FL 32779

FEI Number: 59-2463768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ASKEW, WILLIAM N
521 GOLF TEE LANE
2811 CITRON DR.
4405

#105 LONGWOOD, FL 32779 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.

in the state of Fishad.

SIGNATURE: WILLIAM N. ASKEW 08/23/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 ASKEW, JEANNE F.,
 Name:
 ASKEW, JEANNE F.,

 Address:
 521 GOLF TEE LANE
 Address:
 2811 CITRON DR.

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

Title: V () Delete Title: V (X) Change () Addition
Name: ASKEW WILLIAM N Name: ASKEW WILLIAM N

 Name:
 ASKEW, WILLIAM N
 Name:
 ASKEW, WILLIAM N

 Address:
 521 GOLF TEE LANE
 Address:
 2811 CITRON DR.

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 ASKEW, CHRISTOPHER
 Name:
 ASKEW, CHRISTOPHER

 Address:
 521 GOLF TEE LANE
 Address:
 2811 CITRON DR.

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:
 LONGWOOD, FL 32779

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 N. ASKEW VP 08/23/2005