

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005435

FILED
Mar 22, 2006
Secretary of State

Entity Name: BAYTREE ASSOCIATES, INC.

Current Principal Place of Business:

13925 BALLANTYNE CORPORATE PLACE
SUITE 190
CHARLOTTE, NC 28277 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 30876
CHARLOTTE, NC 282300876

New Mailing Address:

FEI Number: 56-1876019

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CEO () Delete
Name: LOVETTE, GREGORY S
Address: 1009 HONORS COURT
City-St-Zip: WAXHAW, NC 28173 US

Title: PRES () Delete
Name: RODGERS, FRANK S
Address: 1221 MEADOWOOD LANE
City-St-Zip: CHARLOTTE, NC 28211

Title: DAST () Delete
Name: RODGERS, KATHERINE M
Address: 1221 MEADOWOOD LANE
City-St-Zip: CHARLOTTE, NC

Title: SD () Delete
Name: LOVETTE, CHRISTY G
Address: 1009 HONORS COURT
City-St-Zip: WAXHAW, NC 28173

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

SIGNATURE: GREGORY S. LOVETTE

CEO

03/22/2006

Electronic Signature of Signing Officer or Director

Date