

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90090 040 ***150.00

DOCUMENT # J27595 1. Entity Name DATASPACE MANAGEMENT INC.																													
Principal Place of Business 1333 GATEWAY DR SUITE 1002 MELBOURNE, FL 32901 US			Mailing Address 1333 GATEWAY DR SUITE 1002 MELBOURNE, FL 32901 US																										
2. Principal Place of Business - No P.O. Box # 304 S. HARBOR CITY BLVD		3. Mailing Address SAME AS PRINCIPAL																											
Suite, Apt. #, etc. SUITE 101		Suite, Apt. #, etc. PLACE																											
City & State MELBOURNE FL 32901		City & State MELBOURNE FL 32901																											
Zip 32901		Country Brevard		4. FEI Number 59-2716325																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable																									
6. Name and Address of Current Registered Agent TURKNETT, WILLIAM I JR 1333 GATEWAY DR SUITE 1002 MELBOURNE, FL 32901			7. Name and Address of New Registered Agent Name William I. Turknett, JR. Street Address (P.O. Box Number is Not Acceptable) 304 S. HARBOR CITY BLVD. SUITE 101 City MELBOURNE FL Zip Code 32901																										
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:  DATE: 3-29-07 <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PSD</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>TURKNETT, WILLIAM I JR</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1333 GATEWAY DR, STE 1002</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MELBOURNE, FL 32901</td> <td></td> </tr> </table>			TITLE	PSD	<input type="checkbox"/> Delete	NAME	TURKNETT, WILLIAM I JR		STREET ADDRESS	1333 GATEWAY DR, STE 1002		CITY-ST-ZIP	MELBOURNE, FL 32901		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">OWNER</td> <td style="width:20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>WILLIAM I. TURKNETT, JR.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>304 S. HARBOR CITY BLVD. STE 101</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MELBOURNE, FL 32901</td> <td></td> </tr> </table>			TITLE	OWNER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	WILLIAM I. TURKNETT, JR.		STREET ADDRESS	304 S. HARBOR CITY BLVD. STE 101		CITY-ST-ZIP	MELBOURNE, FL 32901	
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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 like empowered.																													
SIGNATURE: 				3-29-07 321-984-1956 <small>Date Daytime Phone #</small>																									