2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L97509

Entity Name: RED BARON MANAGEMENT, INC.

FILED Jan 18, 2005 Secretary of State

Current Principal P	Place of Business:	New Princip	pal Place of	Business

D/B/A SMALL HOPE BAY LODGE
POST OFFICE BOX 21667
FT. LAUDERDALE, FL 333351667

D/B/A SMALL HOPE BAY LODGE
POST OFFICE BOX 21667
FT. LAUDERDALE, FL 333351667 US

Current Mailing Address: New Mailing Address:

D/B/A SMALL HOPE BAY LODGE
POST OFFICE BOX 21667
FT. LAUDERDALE, FL 333351667

D/B/A SMALL HOPE BAY LODGE
POST OFFICE BOX 21667
FT. LAUDERDALE, FL 333351667 US

FEI Number: 65-0224584 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:

BIRCH, JEFF 750 SW 34TH CT FT. LAUDERDALE, FL 33315 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V () Delete Title: V (X) Change () Addition Name: DOUGLAS, PETER Name: DOUGLAS, PETER

Address: PO BOX 21667 Address: PO BOX 21667

City-St-Zip: FT LAUDERDALE, FL 333351667

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

 Name:
 BIRCH, JEFFREY
 Name:
 BIRCH, JEFFREY

 Address:
 PO BOX 21667 N/A
 Address:
 PO BOX 21667 N/A

City-St-Zip: FT. LAUDERDALE, FL City-St-Zip: FT. LAUDERDALE, FL 333351667

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: JEFFREY BIRCH PD 01/18/2005