2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2005
Secretary of State

DOCUMENT# P00000056536

Entity Name: BRUSPORTS, INC.

Current Principal Place of Business:

10600 COPPER LAKE DR.
BONITA SPRINGS, FL 34135

New Principal Place of Business:

Current Mailing Address:

10600 COPPER LAKE DR.
BONITA SPRINGS, FL 34135

New Mailing Address:

FEI Number: 31-1165615 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRUCE, EARLE D
10600 COPPER LAKE DR.
BONITA SPRINGS, FL 34135 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:	P	( ) Delete
Name:	BRUCE, EARLE D	
Address:	10600 COPPER LAKE DR.	
City-St-Zip:	BONITA SPRINGS, FL 34135	
Title:	VP	( ) Delete
Name:	BRUCE, JEAN A	
Address:	10600 COPPER LANE DR.	
City-St-Zip:	BONITA SPRINGS, FL 34135	
Title:	S	( ) Delete
Name:	BRUCE, MICHELE D	
Address:	4325 JENNYDAWN PLACE	
City-St-Zip:	COLUMBUS, OH 43026	
Title:	DIR.	( ) Delete
Name:	BELL, AIMEE S	
Address:	3327 HIGHLAND FORGE TRAIL	
City-St-Zip:	DACULA, GA 30019	
Title:	DIR.	( ) Delete
Name:	SMITH, LYNN A	
Address:	6406 NEWGRANGE DRIVE	
City-St-Zip:	DUBLIN, OH 43016	
Title:	T	( ) Delete
Name:	BRUCE, NOEL S	
Address:	17315 MADISON AVE. APT. 10	
City-St-Zip:	LAKEWOOD, OH 44107	

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:	
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 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: MICHELE D. BRUCE S 02/13/2005

Electronic Signature of Signing Officer or Director — Date