2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056536

Entity Name: BRUSPORTS, INC.

FILED Apr 15, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
5988 ROUI DUBLIN, O	NDSTONE PL H 43016 L	ACE S				
Current Mailing Address:			New Mailii	New Mailing Address:		
5988 ROUN DUBLIN, O	NDSTONE PL H 43016	ACE				
FEI Number:	31-1165615	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
	ARLE D NDSTONE PL H, FL 43016	ACE US				
The above in the State		submits this statement for the pu	rpose of changing it	its registered office or registered agent, or b	ooth,	
SIGNATUR	RE:					
	Electron	ic Signature of Registered Agen	t	Date		
Election Carr	npaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () BRUCE, EARLE 5988 ROUNDST DUBLIN, OH 43	TONE PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () BRUCE, JEAN / 5988 ROUNDS DUBLIN, OH 43	TONE PLACE	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	S () BRUCE, MICHE 4325 JENNYDA COLUMBUS, OI	WN PLACE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition CENCI, MICHELE B 2010 WYANDOTTE RD. COLUMBUS, OH 43212		
Title: Name: Address: City-St-Zip:	DIR. () BELL, AIMEE S 3327 HIGHLANI DACULA, GA 3	D FORGE TRAIL	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	DIR. () SMITH, LYNN A 6406 NEWGRA DUBLIN, OH 43	NGE DRIVE	Title: Name: Address: City-St-Zip:	DIR. (X) Change () Addition SMITH, LYNN A 6301 HYLAND DRIVE DUBLIN, OH 43017		
Title: Name: Address: City-St-Zip:	T () BRUCE, NOEL 17315 MADISO LAKEWOOD, O	N AVE. APT. 10	Title: Name: Address: City-St-Zip:	T (X) Change () Addition POULTON, NOEL B 9313 NORTH BAYLAND DRIVE MCCORDSVILLE, IN 46055		

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: EARLE D. BRUCE P 04/15/2007