2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# P02000081893

Entity Name: BSV GROUP INC.

Current Principal Place of Business:

107 W. MARKS STREET
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

2130 PEKOE CT
CLERMONT, FL 34711 US

New Mailing Address:

16424 MAGNOLIA BLUFF DRIVE
MONTVERDE, FL 34756 US

FEI Number: 41-2052556 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BYRD & GANTT CPA'S
3355 W. VINE STREET
102
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

BYRD & GANTT CPA'S
3359W. VINE STREET
104
KISSIMMEE, FL 34741 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: DEREK BREEN 04/27/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WELLS, GRAHAM W
Address: 2130 PEKOE COURT
City-St-Zip: CLERMONT, FL 34711 US

Title: VP ( ) Delete
Name: WELLS, MICHELE E
Address: 2130 PEKOE COURT
City-St-Zip: CLERMONT, FL 34711 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: WELLS, GRAHAM W
Address: 16424 MAGNOLIA BLUFF DRIVE
City-St-Zip: MONTVERDE, FL 34756 US

Title: VP (X) Change ( ) Addition
Name: WELLS, MICHELE E
Address: 16424 MAGNOLIA BLUFF DRIVE
City-St-Zip: MONTVERDE, FL 34756 US

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: GRAHAM WELLS P 04/27/2005
Electronic Signature of Signing Officer or Director Date