


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2008 8:00 am
Secretary of State

03-26-2008 90019 001 ***150.00

DOCUMENT # P04000051847 1. Entity Name BUCKEYE MANAGER, INC.	
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Principal Place of Business 2212 58TH AVENUE EAST BRADENTON, FL 34203	Mailing Address 2212 58TH AVENUE EAST BRADENTON, FL 34203
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DO NOT WRITE IN THIS SPACE



02122008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0903246	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KNOWLES, TIMOTHY A
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BERUFF, CARLOS 2212 58TH AVE. E BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T JACOBSON, JAKE 16 HIGHLAND AVE. CAMBRIDGE, MA 02139
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP TOKARZ, CHARLES 2212 58TH AVE. E BRADENTON, FL 34203
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS KNOWLES, TIMOTHY 1205 MANATEE AVE. WEST BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Carlos Beruff 26/05 94359 9000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #