2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000056708

Entity Name: NUMBER MANAGEMENT, INC.

FILED Apr 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 27514 BARETTA DR.
 15600 OLD 41 NORTH

 BONITA SPRINGS,, FL 34135
 NAPLES, FL 34110 FL

Current Mailing Address: New Mailing Address:

27514 BARETTA DR. P.O. BOX 2542

BONITA SPRINGS,, FL 34135 BONITA SPRINGS, FL 34133

FEI Number: 20-0953577 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:

HOLROYD, PAULA
27514 BARETTA DR.
1001 AVERLY ST.
FT. MYERS FL. 22010

BONITA SPRINGS, FL 34135 US FT. MYERS, FL 33919 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: PAULA HOLROYD 04/10/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HOLROYD, PAULA
 Name:
 HOLROYD, PAULA

 Address:
 27514 BARETTA DR.
 Address:
 1001 AVERLY ST

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:
 FT. MYERS, FL 33919

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: PAULA HOLROYD PRES 04/10/2005