## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013959

Entity Name: B & A HOLDINGS OF CLEARWATER, INC.

FILED Feb 11, 2008 Secretary of State

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

100 CARILLON PARKWAY 10851 MANGROVE CAY LN NE

SUITE 100 SUITE 413

ST. PETERSBURG, FL 33716 ST. PETERSBURG, FL 33716

Current Mailing Address: New Mailing Address:

100 CARILLON PARKWAY 10851 MANGROVE CAY LN NE SUITE 100 SUITE 413

ST. PETERSBURG, FL 33716 ST. PETERSBURG, FL 33716

FEI Number: 33-1111141 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:

MARSALA, ROSE M
100 CARILLON PARKWAY
SUITE 100
ST. PETERSBURG, FL 33716 US
MARSALA, ROSE M
10851 MANGROVE CAY LN NE
SUITE 413
ST. PETERSBURG, FL 33716 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: ROSE M. MARSALA 02/11/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BYRD, BRANT T
 Name:

 Address:
 371 CHANNELSIDE WALKWAY, #1004
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:

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

Name: KOJAK-BYRD, ALEXANDRA Name: BYRD, ALEXANDRA K

Address: 371 CHANNELSIDE WALKWAY, #1004 Address: 371 CHANNELSIDE WALKWAY, #1004

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602

I hereby certify that the information supplied with this filing does not qualify 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: BRANT T. BYRD D 02/11/2008