

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112527

FILED
Apr 24, 2007
Secretary of State

Entity Name: BA-WRIGHT MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

150 COCONUT DR SUITE 102
INDIALANTIC, FL 32903

New Principal Place of Business:

317 OCEAN AVE
MELBOURNE BEACH, FL 32951

Current Mailing Address:

150 COCONUT DR SUITE 102
INDIALANTIC, FL 32903

New Mailing Address:

317 OCEAN AVE
MELBOURNE BEACH, FL 32951

FEI Number: 10-3376021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE TORPY GROUP, P.L.
202 N HARBOR CITY BLVD STE 200
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: WRIGHT, ANDREW
Address: 150 COCONUT DR SUITE 103
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: WRIGHT, ANDREW
Address: 317 OCEAN AVE
City-St-Zip: MELBOURNE BEACH, FL 32951

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: ANDREW WRIGHT

PST

04/24/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date