

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003335

FILED
Apr 28, 2006
Secretary of State

Entity Name: BTAS, INC.

Current Principal Place of Business:

3572 DAYTON-XENIA ROAD, SUITE 210
BEAVERCREEK, OH 45432

New Principal Place of Business:

Current Mailing Address:

3572 DAYTON-XENIA ROAD, SUITE 210
BEAVERCREEK, OH 45432

New Mailing Address:

FEI Number: 31-1431073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: P () Delete
Name: VLAHOS, ANGLEA F
Address: 5601 WILLOW TWIG LANE
City-St-Zip: DAYTON, OH 45459

Title: V () Delete
Name: SOTMAN, JOHN B
Address: 37 RIFUMA WAY, P.O. BOX 169
City-St-Zip: NORWAY, OH 04268

Title: S () Delete
Name: VLAHOS, GEORGE S
Address: 11 SHAFOR BLVD.
City-St-Zip: DAYTON, OH 45409

Title: T () Delete
Name: DYER, CHARLES T
Address: 38011 SOUTH DESERT BLUFF DRIVE
City-St-Zip: TUCSON, AZ 85739

Title: M (X) Delete
Name: COMMON, BILLIE T
Address: 6399 STONEY CREEK DRIVE
City-St-Zip: HUBER HEIGHTS, OH 45424

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FRONISTA, ANGLEA
Address: 5601 WILLOW TWIG LANE
City-St-Zip: DAYTON, OH 45459

Title: V (X) Change () Addition
Name: SOTMAN, JOHN B
Address: 37 RIFUMA WAY, P.O. BOX 169
City-St-Zip: NORWAY, ME 04268

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUSAN M. WAGNER

AMGR

04/28/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date