FILE NO	W: FILING F	EE AFTER M	AY 1 IS \$225.00			
PROFI CORPORA ANNUAL RE <b>1996</b>	T TION EPORT	FLO	RIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State VISION OF CORPORATIONS			
DOCUMEN 1. Corporation Name	⊤# <b>J48</b> 6	886	(6)			
RUNK PROP	ERTIES, INC.					
Principal Place of Busine	oss	Mailing Addre	ess		10 0111 01914 01811 0 <u>1011 91011 01914 0171</u> 1 1701	
180 STATE ROAD 207 ST AUGUSTINE FL 32095-0157 \$180 STATE ROAD ST AUGUSTINE F			ROAD 207 TINE FL 32095-0157			
	· · · · · · · · · · · · · · · · · · ·			3. Date Incorporated or Qualified 12/24/1986	3a. Date of Last Report 05/01/1995	
2. Principal Place of Bu	siness	2a. Mailing Ad	Idress	4. FEI Number	Applied For	
Suite, Apt. #, etc.		26		59-2775710	Not Applicable	
2		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & Sta	te	Election Campaign Financing     Trust Fund Contribution		
Zip 4	Country 25	Zip <b>29</b>	Country 30	8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s. 199.032,	
9. Nar	ne and Address of Cu	rrent Registered Age	nt last	10. Name and Address of New R	_	
RUNK, CHRISTO	OPHER		81 Name	3		

Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am

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83 84 City

Street Address (P.O. Box Number is Not Acceptable)

2.	Signature, typed or printed name of registered agent and		TE: Registered Agent signature required	
	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
ITLF	VTD	□ DELETE	1. 1 TITLE	Change: Add
AMê	RUNK, PAUL BRADLEY		1.2 NAME	
TREE1 ADDRESS	180 STATE ROAD 207		1.3 STREET ADDRESS	
11Y-S1-2(P	ST AUGUSTINE FL		14 City-St-ZiP	
TLE	VSD	☐ DELETE	2. 1 TITLE	Change Add
AME	runk, arthur H., Jr.		2.2 NAME	
TREET ADDRESS	180 STATE ROAD 207		2 3 STREET ADDRESS	
TY-ST-ZIP	ST AUGUSTINE FL		2.4 CITY - ST - ZIP	
TLE	PD	DELETE	3 1 TITLE	☐ Change ☐ Addi
AME:	RUNK, CHRISTOPHER		32 NAME	find a second of the second of
FREET ADDRESS	180 STATE ROAD 207		3.3. STREET ADDRESS	
TY - ST - ZIP	ST AUGUSTINE FL		3.4 CITY - ST - ZIP	
FLE [		☐ DELETE	4. 1 TITLE	Change Addi
AME			4.2 NAME	
REET ADDRESS			4.3 STREET ADDRESS	
1Y - \$T - ZIP			4.4 CITY-ST-ZIP	
TLF		DELETE	5 1 TITLE	Change Addi
ME			5.2 NAME	
REET ADDRESS			5.3 STREET ADDRESS	
TY-ST- <b>Z</b> IP			5.4 CITY-ST-ZIP	
LF		☐ DELETE	6 1 TITLE	Change Addi
Mξ			6.2 NAME	Change Room
REE1 ADDRESS			6 3 STREET ADDRESS	
TY-ST-ZIP			6 4 CHTY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: CHLISTSPHER RUK (

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180 STATE RD 207 ST AUGUSTINE FL 32095

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