

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002880

FILED
Apr 17, 2007
Secretary of State

Entity Name: PALM BEACH ROADRUNNERS, INC.

Current Principal Place of Business:

605 BELVEDERE ROAD
SUITE 9
WEST PALM BEACH, FL 33405 US

New Principal Place of Business:

Current Mailing Address:

605 BELVEDERE ROAD
SUITE 9
WEST PALM BEACH, FL 33405 US

New Mailing Address:

FEI Number: 65-0497413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALK, GARY
515 N. FLAGLER DRIVE, 18TH FLOOR
WEST PALM BEACH, FL 33401 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RAGSDALE, DAVE
Address: 605 BELVEDER ROAD, SUITE 9
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DVP () Delete
Name: KURLAND, SANDE
Address: 4348-B HAZEL AVENUE
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: WALK, GARY
Address: 515 N. FLAGLER DRIVE, 18TH FLOOR
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D () Change (X) Addition
Name: ROSEN, ERIC A
Address: 216 ANDALUSIA DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERIC A. ROSEN

D

04/17/2007

Electronic Signature of Signing Officer or Director

_____ Date