

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000003652

**Entity Name:** IS - RUNOFF MANAGEMENT, INC.

**FILED**  
**Apr 28, 2015**  
**Secretary of State**  
**CC7526254310**

**Current Principal Place of Business:**

2003 LAMAR BLVD.  
100  
ARLINGTON, TX 76006

**Current Mailing Address:**

2003 LAMAR BLVD.  
100  
ARLINGTON, TX 76006

**FEI Number:** 20-4677827

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BEALE, CHARLES L  
500 HARBOR PL DR.  
SUITE 206  
TAMPA, FL 33602 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title CEO  
Name NEWTON, RICHARD M  
Address 4 BEECHWOOD CIRCLE  
City-State-Zip: CHADD FORD PA 19317

Title S  
Name THOMPSON, KATHLEEN  
Address 2003 E. LAMAR BLVD., #100  
City-State-Zip: ARLINGTON TX 76006

Title T  
Name BEALE, CHARLES L  
Address 500 HARBOR PL DRIVE #206  
City-State-Zip: TAMPA FL 33602

Title VP  
Name THOMPSON, KATHLEEN  
Address 3312 THORNHILL DR  
City-State-Zip: ARLINGTON TX 76001

Title O  
Name NEWTON, MARK J  
Address 4 BEECHWOOD CIRCLE  
City-State-Zip: CHADDS FORD PA 19317

Title O  
Name NEWTON, JACLYN C  
Address 4 BEECHWOOD CIRCLE  
City-State-Zip: CHADDS FORD PA 19317

Title VP  
Name PRESTON, KEVIN L  
Address 2003 LAMAR BLVD.  
100  
City-State-Zip: ARLINGTON TX 76006

*I hereby 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 all other like empowered.*

**SIGNATURE:** KEVIN PRESTON

**VICE-PRESIDENT**

**04/28/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date