
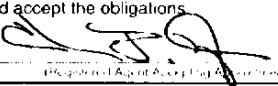



File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1 Name and Mailing Address of Limited Liability Company FUNRUN SPORTS, L.C. 740 CHARMWOOD DRIVE ST. AUGUSTINE FL 32086		DOCUMENT # L98000001050	
2 Principal Place of Business 740 Charmwood Dr. Suite, Apt. #, etc.		2a. Mailing Address 740 Charmwood Dr. Suite, Apt. #, etc.	
City & State St. Augustine, FL Zip 32086 Country USA		City & State St. Augustine, FL Zip 32086 Country USA	
3. Date Organized or Qualified 07/13/1998		3a. State of Formation FL	
4. FEI Number 59-3524937		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report N/A		6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	
7. Name and Address of Current Registered Agent MARTOGLIO, CHRISTOPHER J 740 CHARMWOOD DRIVE ST. AUGUSTINE FL 32086		8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE  DATE April 21, 1999			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	MARTOGLIO, CHRISTOPHER	740 CHARMWOOD DRIVE	ST. AUGUSTINE FL
11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address. SIGNATURE:  4/21/99 904-460-4848			

FILED

99 MAY -4 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1a. Principal Place of Business Address

740 CHARMWOOD DRIVE
ST. AUGUSTINE FL 32086

3. Date Organized or Qualified

07/13/1998

3a. State of Formation

FL

4. FEI Number

59-3524937

☐ Applied For

☐ Not Applicable

5. Date of Last Report

N/A

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

MARTOGLIO, CHRISTOPHER J
740 CHARMWOOD DRIVE
ST. AUGUSTINE FL 32086

8. Name and Address of New Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE April 21, 1999

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	MARTOGLIO, CHRISTOPHER	740 CHARMWOOD DRIVE	ST. AUGUSTINE FL

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****188.75 ****188.75

APR - 7 1999

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SIGNATURE:



4/21/99

904-460-4848