2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005
Secretary of State

DOCUMENT# N01000005106

Entity Name: GP MILE RUN COMMITTEE, INC.

Current Principal Place of Business:

901 S FEDERAL HWY
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

901 S FEDERAL HWY
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HIRAGA, BETTY
901 S FEDERAL HIGHWAY
HALLANDALE BEACH, FL 33009 US

Name and Address of New Registered Agent:

MUENCH, LANAE
901 S FEDERAL HIGHWAY
HALLANDALE BEACH, FL 33009 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: LANAE MUENCH 07/25/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SAVIN, SCOTT
Address: 901 S FEDERAL HWY
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D ( ) Delete
Name: DONN, DOUGLAS
Address: 901 S FEDERAL HWY
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D ( ) Delete
Name: TESTA, DENNIS
Address: 901 S FEDERAL HWAY
City-St-Zip: HALLANDALE BEACH, FL 33009

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SCOTT SAVIN D 07/25/2005
Electronic Signature of Signing Officer or Director Date