

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N04000006945 1. Entity Name RICHARD'S RUN FOR LIFE, INC.	
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Principal Place of Business 2025 EAST 7TH AVENUE TAMPA, FL 33605-0999	Mailing Address 2025 EAST 7TH AVENUE TAMPA, FL 33605-0999
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04272008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1504152	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SHANNON, JEFFREY C 501 EAST KENNEDY BOULEVARD SUITE 1700 TAMPA, FL 33602
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000937954 05/27/08-80071-019 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GONZMART, RICHARD 2025 EAST 7TH AVENUE TAMPA, FL 336050999
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GONZMART, CASEY 2025 EAST 7TH AVENUE TAMPA, FL 336050999
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEDOROVICH, DENNIS 2025 EAST 7TH AVENUE TAMPA, FL 336050999
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>DENNIS J. FEDOROVICH</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>4/28/08</u> Date	<u>(813) 248-3200</u> Daytime Phone #
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