

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2007 8:00 am
Secretary of State

05-22-2007 90013 014 ****61.25

DOCUMENT # N04000010213

1. Entity Name
ROCKAIDS, INC.



Principal Place of Business
**1001 86TH AVE N
ST. PETERSBURG, FL 33702**

Mailing Address
**1001 86TH AVE N
ST. PETERSBURG, FL 33702**



05082007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4289152

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROBINSON, JANET M
1001 86TH AVE N
ST. PETERSBURG, FL 33702**

**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

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ROBINSON, JANET M
STREET ADDRESS 1001 86TH AVE N
CITY-ST-ZIP ST. PETERSBURG, FL 33702

TITLE VTD
NAME MCATASNEY, SCOTT
STREET ADDRESS 615 74TH AVE. N.
CITY-ST-ZIP SAINT PETERSBURG, FL 33702

TITLE VSD
NAME BRUNSON, ED
STREET ADDRESS 7400 21ST ST N
CITY-ST-ZIP ST PETERSBURG, FL 33702

TITLE D
NAME O'DONNELL, MARK
STREET ADDRESS 6486 150TH AVE N
CITY-ST-ZIP CLEARWATER, FL 33760

TITLE CD
NAME MANN, MARK
STREET ADDRESS 4120 18TH AVE N
CITY-ST-ZIP SAINT PETERSBURG, FL 33713

TITLE D
NAME DOLGIN, CARMELLA
STREET ADDRESS 555 85TH AVE. LN
CITY-ST-ZIP SAINT PETERSBURG, FL 33702

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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:

Janet M Robinson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-07

727-420-6269

Date

Daytime Phone #

* See attached for additional directors

ATTACHMENT

40117537

N04000010213

ROCKAIDS, INC OFFICERS/DIRECTORS JULY 22, 2006

TITLE	PD
NAME	ROBINSON, JANET M
STREET ADDRESS	1001 86TH AVE N
CITY - ST - ZIP	ST. PETERSBURG, FL 33702
TITLE	VTD
NAME	McATASNEY, SCOTT
STREET ADDRESS	615 74TH AVE N
CITY - ST - ZIP	ST. PETERSBURG, FL 33702
TITLE	VSD
NAME	BRUNSON, ED
STREET ADDRESS	7400 21ST ST N
CITY - ST - ZIP	ST PETERSBURG, FL 33702
TITLE	D
NAME	O'DONNELL, MARK
STREET ADDRESS	6486 150TH AVE N
CITY - ST - ZIP	CLEARWATER, FL 33760
TITLE	CD
NAME	MANN, MARK
STREET ADDRESS	4120 18TH AVE N
CITY - ST - ZIP	SAINT PETERSBURG, FL 33713
TITLE	D
NAME	BENNETT, JAMES
STREET ADDRESS	768 PINELLAS POINT DR S
CITY - ST - ZIP	ST. PETERSBURG, FL 33705
TITLE	D
NAME	DOLGIN, CARMELLA
STREET ADDRESS	555 85TH AVE N
CITY - ST - ZIP	ST. PETERSBURG, FL 33702
TITLE	D
NAME	GUTHRIE, CHRISTINA
STREET ADDRESS	4131 18TH AVE N
CITY - ST - ZIP	ST. PETERSBURG, FL 33713
TITLE	D
NAME	RODWICK, MD, BARRY
STREET ADDRESS	3135 STATE RD 580 SUITE 1
CITY - ST - ZIP	SAFETY HARBOR, FL 34695

* = directors not included on downloaded form