2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012756

Entity Name: RUMRUNNER FOUNDATION INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2405 FOX FOREST DRIVE 1101 SEFFNER VALRICO ROAD

LUTZ, FL 33549 VALRICO, FL 33549

Current Mailing Address: New Mailing Address:

2405 FOX FOREST DRIVE P.O. BOX 1408 LUTZ, FL 33549 VALRICO, FL 33548

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

HARDER, GEORGE CABRERA, PEDRO 2405 FOX FOREST DRIVE 1101 SEFFNER VALRICO ROAD LUTZ, FL 33549 VALRICO, FL 33549

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: PEDRO CABRERA 04/26/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP (X) Change () Addition () Delete HARDER, GEORGE CABRERA, PEDRO Name: Name:

2405 FOX FOREST DRIVE Address: 1101 SEFFNER VALRICO ROAD Address:

City-St-Zip: LUTZ, FL 33549 City-St-Zip: VALRICO, FL 33549

Title: (X) Delete Title: () Change () Addition

CABRERA, PEDRO Name: Name: Address: 2405 FOX FOREST DRIVE Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip:

Title: () Delete Title: (X) Change () Addition PLOTZ, STEVE Name: PLOTZ, STEVE Name:

2405 FOX FOREST DRIVE Address: Address:

1101 SEFFNER VALRICO ROAD

City-St-Zip: LUTZ. FL 33549 City-St-Zip: VALRICO, FL 33549

Title: () Delete Title: (X) Change () Addition

BIGGS, AUDREY Name: Name: BIGGS, AUDREY

2405 FOX FOREST DRIVE 1101 SEFFNER VALRICO ROAD Address: Address: City-St-Zip: LUTZ, FL 33549 City-St-Zip: VALRICO, FL 33549

Title: () Delete Title: (X) Change () Addition

BROWN, TRACE BROWN, TRACE Name: Name:

2405 FOX FOREST DRIVE 1101 SEFFNER VALRICO ROAD Address: Address:

City-St-Zip: LUTZ, FL 33549 City-St-Zip: VALRICO, FL 33549

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PEDRO CABRERA DP 04/26/2007