

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010561

FILED
Feb 21, 2008
Secretary of State

Entity Name: JIM ROSENKRANS' TOY RUN FOUNDATION, INC.

Current Principal Place of Business:

2805 54TH AVE NORTH
ST PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

2805 54TH AVE NORTH
ST PETERSBURG, FL 33714

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENKRANS, JAMILOU T
2805 54TH AVE NORTH
ST PETERSBURG, FL 33714 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSENKRANS, JAMILOU T
Address: 2805 54TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33714

Title: VD () Delete
Name: GREENSTEIN, STEVE
Address: 216 LAKE HOBBS ROAD
City-St-Zip: LUTZ, FL 33549

Title: STD () Delete
Name: RHODES, DAWN
Address: 8101 31ST AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: RHODES, DAWN
Address: 8101 31ST AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

Title: TD () Change (X) Addition
Name: DEFAZIO, BRIAN A
Address: 5364 NEIL DRIVE
City-St-Zip: ST PETERSBURG, FL 33714

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: JAMILOU T. ROSENKRANS

PD

02/21/2008

Electronic Signature of Signing Officer or Director

Date