FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

May 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600000794 (5)

FLORIDA RUNNING FESTIVAL, INC.

Principal Plac	e of Business	Mailing Address			IE 001H 2011 00H 10H 10H 10H 10H 10H 10H
C/O STEVE EDWARDS 131 82ND AVE TREASURE ISLAND FL 33706-3319		C/O STEVE EDWARDS 131 82ND AVE TREASURE ISLAND FL 33706-3319			3
				3. Date Incorporated or Qualified 02/13/1996	3a. Date of Last Report
i	lace of Business	2a. Mailing Address		4. FEI Number 336047	Applied For
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Flection Campaign Financing	\$5.00 May Be
23		28	·	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for int	· —
24	9. Name and Address of Currer		30	Florida Statutes 10. Name and Address of New Regi	Yes No
81 Name 1.1. (3)					
CLARK, BLAIR W 82 Street Address (P.O. Box Number is Not Acceptable)					
300 31ST ST N					
SUITE 101 83					
ST PETE	RSBURG FL 33713		B4 City	. 6	85 Zip Code
				St Yetersburg	FL 33767
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Elorida Statutes.					
SIGNATURE .	Signature, typed or printed name of registered age	ont and title if applicable (NOTF:	Registered Agent signature r	WWW.	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	RUZICKA, RICHARD R		1.2 NAME		
STREET ADDRESS	7112 2ND AVE S		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33707	T on the	1.4 CITY+ST-ZIP		Observe Address
TITLE	D Normile, Martin	☐ DEFELE	2.1 TITLE		Change Addition
NAME STREET ADDRESS	615 14TH AVE NE		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL 33701		2.4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	MCDONALD, CHRISTOPHER	D	3.2 NAME		
STREET ADDRESS	13589 101ST TER N		3.3 STREET ADDRESS	849 Apalachee T	OrNE
CITY-ST-ZIP	SEMINOLE FL 34646		3.4, CITY-ST-ZIP	849 Apalachee T st Peters bury 71	33702
TITLE		☐ DELETE	4.1 TITLE	D 4 71	Change Addition
NAME	Dee Anna Farnell	C10 315	4 2 NAME	Dre Anna Fornell Ste	1215
STREET ADDRESS	Clearwater 71	る(() マノ さ) た ないさ	4 3 STREET ADDRESS	Cleurwater 71 346	11
CITY-ST-ZIP TITLE	MENTUATE! II	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	CHANCOLLE 11 210	Change Addition
NAME		FT breeze	5.2 NAME		C Subullo C Manifold
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELFTE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made undor oath; that I am an officer or director of this perpuration or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or flock) of it changed, or on an attachmost with an address.