
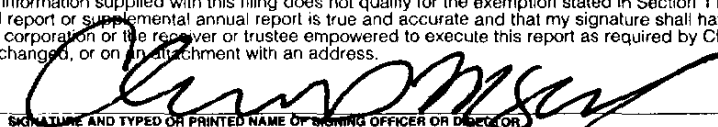


FILE NOW: FILING FEE IS \$61.25

FILED

May 15 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N96000000794 (5)</b> 1. Corporation Name <b>FLORIDA RUNNING FESTIVAL, INC.</b>					
Principal Place of Business <b>C/O STEVE EDWARDS 131 92ND AVE TREASURE ISLAND FL 33706-3319</b>			Mailing Address <b>C/O STEVE EDWARDS 131 92ND AVE TREASURE ISLAND FL 33706-3319</b>		
2. Principal Place of Business <b>21</b>		2a. Mailing Address <b>26</b>		3. Date Incorporated or Qualified <b>02/13/1996</b>	
Suite, Apt. #, etc. <b>22</b>		Suite, Apt. #, etc. <b>27</b>		4. FEI Number <b>59-3360473</b>	
City & State <b>23</b>		City & State <b>28</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>24</b>	Country <b>25</b>	Zip <b>29</b>	Country <b>30</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
9. Name and Address of Current Registered Agent <b>RUZICKA, RICHARD R 7112 2ND AVE S ST PETERSBURG FL 33707</b>				10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code	
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, Florida Statutes.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
12. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	<b>PD</b>	<b>RUZICKA, RICHARD R</b>	<b>7112 2ND AVE S ST PETERSBURG FL 33707</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<b>VPD</b>	<b>NORMILE, MARTIN</b>	<b>615 14TH AVE NE ST PETERSBURG FL 33701</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<b>SD</b>	<b>MCDONALD, CHRISTOPHER D</b>	<b>849 APALACHEE DR NE ST PETERSBURG FL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<b>D</b>	<b>FARNELL, DEANNA</b>	<b>C/O 315 COURT ST., RM. 484 CLEARWATER FL 34616</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<b>D</b>	<b>KIEFFER, JON C</b>	<b>6670 - 1ST AVE. S. ST. PETERSBURG FL 33707</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
14. I 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 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 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE:  <b>4-29-98</b> <b>813-363-7864</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0051032</small>					

CR2E037 (10/97)