

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000000516

FILED
Mar 24, 2003
Secretary of State

Entity Name: ORLANDO ROADRUNNERS, INC.

Current Principal Place of Business:

3149-H WHISPER LAKE LANE
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

C/O ASWAD SMITH
P.O. BOX 677726
ORLANDO, FL 32867 US

New Mailing Address:

FEI Number: 31-1636838 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ASWAD A
3149-H WHISPER LAKE LANE
WINTER PARK, FL 32792 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: SMITH, ASWAD
Address: 3149-H WHISPER LAKE LANE
City-St-Zip: WINTER PARK, FL 32792

Title: TD () Delete
Name: SLATER, ERICA L
Address: 620 RENAISSANCE POINTE UNIT 208
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DV () Delete
Name: FULTON, DELVIN
Address: 3149-H WHISPER LAKE LANE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ASWAD A. SMITH

PD

03/24/2003

Electronic Signature of Signing Officer or Director

_____ Date