

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026817

FILED
Jul 22, 2008
Secretary of State

Entity Name: FORERUNNER DONUTS, INC.

Current Principal Place of Business:

12512 ROYAL DUBLIN AVE
ODESSA, FL 33556

New Principal Place of Business:

1439 LENTON ROSE CT
TRINITY, FL 34655

Current Mailing Address:

12512 ROYAL DUBLIN AVE
ODESSA, FL 33556

New Mailing Address:

1439 LENTON ROSE CT
TRINITY, FL 34655

FEI Number: 22-3536734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHABO, THOMAS
12512 ROYAL DUBLIN AVE
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

SHABO, THOMAS
1439 LENTON ROSE CT
TRINITY, FL 34655 US

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: THOMAS SHABO

07/22/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHABO, HANNIBAL
Address: 12512 ROYAL DUBLIN AVE
City-St-Zip: ODESSA, FL 33556

Title: VP () Delete
Name: SHABO, THOMAS
Address: 12512 ROYAL DUBLIN AVE
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHABO, HANNIBAL
Address: 1439 LENTON ROSE CT
City-St-Zip: TRINITY, FL 34655

Title: VP (X) Change () Addition
Name: SHABO, THOMAS
Address: 1439 LENTON ROSE CT
City-St-Zip: TRINITY, FL 34655

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS SHABO

VP

07/22/2008

Electronic Signature of Signing Officer or Director

Date