2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT# P01000065580

1. EntityName
ROARING FORK CORPORATION

PrincipalPlaceofBusiness
550BILTMOREWAY
SUITE700
CORALGABLES,FL33134

MailingAddress
550BILTMOREWAY
SUITE700
CORALGABLES,FL33134

DO NOT WRITE IN THIS SPACE

04272004 NoChg-P CR2E034(10/03)

4. FEINumber
65-1131291
☐ AppliedFor
☐ NotApplicable

5. CertificateofStatusDesired ☐ **$8.75** Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

HOLLANDER, MARK
1140 N KENDALL DR 207
MIAMI, FL 33176

DO NOT WRITE IN THIS SPACE

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredoffice,registeredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE _____ DATE
Signature,typedorprintednameofregisteredagentandtitleifapplicable (NOTE:RegisteredAgentsignaturerequiredwhenre instating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. ElectionCampaignFinancing TrustFundContribution. ☐ **$5.00** MayBe AddedtoFees

U00000154932
050505/04-80017-012 150.00

10. OFFICERSANDDIRECTORS

TITLE	D
NAME	CAMNER, DANIELLE
STREETADDRESS	550 BILTMORE WAY, SUITE 700
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	D
NAME	CAMNER, ANNE S
STREETADDRESS	550 BILTMORE WAY, SUITE 700
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. Ihereby 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Danielle D. Camner 4/27/04 305-442-4994
SIGNATUREANDTYPEORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#