2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

Apr 13, 2005 8:00 am Secretary of State **DOCUMENT # P03000093929** 04-13-2005 90028 042 ***150.00 RUNWAY BAYS, INC Principal Place of Business Mailing Address 250 RIGGS AVE 250 RIGGS AVE MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951 02252005 CR2E034 (10/03) Chg-P 4. FEI Number Applied For 56-2388864 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ALTERMAN, ROY A Street Address (P.O. Box Number is Not Acceptable) 2115 PALM BAY ROAD, NE STE 1E . PALM BAY, FL 32905 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature ivoed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. PT TITLE ☐ Delete TITLE ☐ Change ☐ Addition PEARCE, DAVID C NAME NAME STREET ADDRESS 250 RIGGS AVE STREET ADDRESS MELBOURNE BEACH, FL 32951 CITY-ST-7IP CITY-ST-ZIP vs ☐ Delete ☐ Change TITLE TITLE Addition PEARCE, KAREN CHADWICK NAME NAME 250 RIGGS AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MELBOURNE BEACH, FL 32951 ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Delete TITI F Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE - - · NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 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.