## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 25, 2005 8:00 am Secretary of State

DOCUMENT # P03000105313  1. Entity Name ROADRUNNER SERVICE STATION, INC.			03-25-2005 90031 040 ***150.00		
Principal Plac	e of Business	Mailing Address			
RR 1, BOX 380E RR 1, BOX 380E				1 1881 . 28 1 4	
LAKE BUTLER, FL 32054 US LAKE BUTLER, FL 32054		54 US			
			., 55		
2. Principal Place of Business		3. Mailing Address			
Coine And House					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03102005 Chg-P CR2E034 (10/03)	
City & State		City & State		A CELLULATION AND A CELLULATIO	
City & State		City & State		4. FEI Number Applied For 20-0248428 Not Applied	bla.
Zip	Country	Zip	Country	¢0.75	DIG
,	,		200.107	5. Certificate of Status Desired See Required Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	
			Name		
BARRICK,			Ctroot Address	s (P.O. Box Number is Not Acceptable)	
RR 1, BOX	LER, FL 32054		Sileet Addres	s (F.O. box Number is Not Acceptable)	
DAKE BOT	EEN, 1 E 32034				
			City	<b>□</b>	
				FL	
8. The above	named entity submits this statement to	or the purpose of changing its r	egistered office or regis	tered agent, or both, in the State of Florida. I am familiar with, and acce	pt
the obligat	ions of registered agent.				
SIGNATURE_	<u> </u>				
	Signature, based or printed name of registered spect				
	Ogrados, typod or printed have diregistered again	and title if applicable, UF (NOTE:	Registered Agent signature requ		
Fil. After Ma	E NOW!!! FEE IS \$150.00	9. Election Campaig	<del></del>	5.00 May Re	-
After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.	9. Election Campaig Trust Fund Contri	gn Financing———————————————————————————————————	5.00 May Be dded to Fees	-
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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.

CITY-ST-ZIP[ ]

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR DATE OF DIRECTOR DIRECTO