2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

May 03, 2007 8:00 am Secretary of State **DOCUMENT # P04000155696** 1. Entity Name 05-03-2007 90055 006 ***150.00 **SNAILRUN INC** Principal Place of Business Mailing Address 1549 LYNCHBURG LOOP 1549 LYNCHBURG LOOP THE VILLAGES, FL 32162 THE VILLAGES, FL 32162 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. Sunl 03302007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 56-2488838 Not Applicable 32162 \$8.75 Additional 3216 5. Certificate of Status Desired IBA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Hendrickson WHITE, NANCY L Box Number is Not Acceptable) 1549 LYNCHBURG LOOP THE VILLAGES, FL 32162 8. The above parmed 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. **PRES** PRESIDENT **Change** ☐ Addition TITLE Delete TITLE WHITE, NANCY L Nenderckson, Nancy L. NAME NAME STREET ADDRESS 1549 LYNCHBURG LOOP STREET ADDRESS 1549 Lynchburg THE VILLAGES, FL 32162 CITY-ST-ZIP CITY-ST-7IP Villages, TITLE ☐ Delete TITLE OF Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Defete TITLE ☐ Addition 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 exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 changed, or on an attactiment with an address, with all other like empowered.

G OFFICER OR DIRECTOR

FILED

Daytime Phone 6

STATE OF FLORIDA, COUNTY OF LAKE HEREBY CERTIFY that the above and fore-ATTACHMENT ng is a true copy of the original filed in omes C. Watkins, Clark Circuit Court Department of Health - Vital Statistics (STATE FILE NUMBER) STATE OF FLORIDA MARRIAGE RECORD TYPE IN UPPER CASE USE BLACK INK CFN 2006104227
Bk 03206 Ps 0203; (1ps)
DATE: 07/10/2006 10:59:28 AM
JAMES C. WATKINS, CLERK OF COURT
LAKE COUNTY This license not valid unless seal of Clerk, Circuit or County Court, appears thereon. CFN 2006 ML 001244 (APPLICATION NUMBER) RECORDING FEES 0.00 APPLICATION TO MARRY I. GROOM'S NAME (First, Middle, Last) 2. DATE OF BIRTH (Month, Day, Year) STEVEN C HENDRICKSON 11/21/1936 3a. RESIDENCE - CITY, YOWN, OR LOCATION BIRTHPLACE (State or Foreign Country) 36. COUNT STATE FLORIDA SUMTER NEW YORK Se. BRIDE'S NAME (First, Middle, Last) DATE OF BIRTH (Month, Day, Year) BAKER 05/02/1941 Ta. RESIDENCE - CITY, TOWN, OR LOCATION BIRTHPLACE (State or Foreign Country) 7h COUNT SUMTER FLORIDA CONNECTICUT WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF. STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEGGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSE TO MARRY.

SIGNATURE OF GROOM (Sign half) and sign high kin)

[10] SUBSCRIBED AND SWORN TO BEFORE WE ON (DATE) June 16, 2006 12. SIGNATURE OF OFFICIAL (Use black ink) JAMES C. WATKINS, CLERK OF COURT BY: D.C. URE OF BRIDE (Sign full name using thack ink) 4. SUBSCRIBED A June 16, 2006 16. SIGNATURE OF OFFICIAL (Use black ink) JAMES C, WATKINS, CLERK OF COURT BY: D.CQ

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR SEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID. 9. EXPIRATION DATE

LICENSE TO MARRY

COUNTY ISSUING LICENSE 18. DATE LICENSE ISSUED 189. DATE LICENSE EFFECTIVE LAKE 06/16/2006 WW 06/19/2006 08/15/2006 SIGNATURE OF COURT CLERK OR JUDGE Oc. BY D.C. JAMES C. WATKINS

CLERK OF CIRCUIT COURT

CERTIFICATE OF MARRIAGE

SEAL

THE VILLAGES

NANCY L WHITE

THE VILLAGES

HEREBY CERTIFY THAT THE ABOVE NAMED GROOM AND BRIDE WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF

ATION OF PROPERTY SQUARES -06

NOTER CRETITED)

ATE OF MARRIAGE (Month, Day, Year)

Book3206/Page203

CFN#2006104227

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