## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000077733

Entity Name: SALT RUN SALES, INC.

FILED Feb 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 81 LIGHTHOUSE AVE ST AUGUSTINE, FL 32080 **Current Mailing Address: New Mailing Address:** 81 LIGHTHOUSE AVE ST AUGUSTINE, FL 32080 FEI Number: 20-2940377 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FLEMING, KATHY 81 LIGHTHOUSE AVE ST AUGUSTINE, FL 32080 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition ADAMS, DEBORAH M Name: Name: ADAMS, DEBORAH M P O BOX 5120 P O BOX 5120 Address: Address: City-St-Zip: ST AUGUSTINE, FL 32085 City-St-Zip: ST AUGUSTINE, FL 32085 VCD Title: Title: () Delete (X) Change ( ) Addition Name: ECKSTEIN, PAUL Name: FLOYD, THERESA 127 HABERSHAM DR 111 2 ND STREET Address: Address: FLAGLER BEACH, FL 32136 ST. AUGUSTINE, FL 32080 City-St-Zip: City-St-Zip: Title: TD ( ) Delete Title: (X) Change ( ) Addition HAMEL, RAY HAMEL, RAY Name: Name: 13 BERMUDA RUN WAY 13 BERMUDA RUN WAY Address: Address: ST AUGUSTINE, FL 32080 City-St-Zip: ST AUGUSTINE, FL 32080 City-St-Zip: Title: () Delete Title: V C (X) Change ( ) Addition BLOW, LYNNE STRANDHAGEN, KAREN Name: Name: Address: 100 SANTA MONICA AVE Address: 164 INLET DRIVE City-St-Zip: ST AUGUSTINE, FL 32080 City-St-Zip: ST AUGUSTINE, FL 32080 Title: Title: (X) Change ( ) Addition ED () Delete AD D FLEMING, KATHY A Name: FLEMING, KATHY A Name: 81 LIGHTHOUSE AVE Address: 81 LIGHTHOUSE AVE Address: City-St-Zip: ST AUGUSTINE, FL 32080 City-St-Zip: ST AUGUSTINE, FL 32080 Title: () Delete Title: ( ) Change (X) Addition USINA, MICHAEL Name: Name: 4125 COASTAL HIGHWAY Address: Address: City-St-Zip: City-St-Zip: ST. AUGUSTINE, FL 32084

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHY A. FLEMING AD D 02/20/2007