2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000077733

Entity Name: SALT RUN SALES, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	HOUSE AVE STINE, FL 32	080			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	HOUSE AVE STINE, FL 32	080			
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	f New Registered Agent:	
	KATHY HOUSE AVE STINE, FL 32	080 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SECT (FLOYD, THER 111 2 ND STR ST. AUGUSTIN	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C (MALONEY, GE 231 BARONY JACKSONVILL	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V C (STRANDHAGE 164 INLET DR ST AUGUSTIN	IVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AD D (FLEMING, KA ⁻ 81 LIGHTHOU ST AUGUSTIN	SE AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TRES (FINNEGAN, JO 279 ST. GEOR ST. AUGUSTIN	GE STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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 FLEMING AD D 04/16/2009