2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024948

Entity Name: MSRF, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12991 44TH STREET N 3201 118TH AVENUE NORTH CLEARWATER, FL 33762

UNIT 7

CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

12991 44TH STREET N 8270 63RD WAY NORTH CLEARWATER, FL 33762 PINELLAS PARK, FL 33781

FEI Number: 20-8501636 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:

ARTHUR, ROBERT J HAIRE, HEATHER H 12991 44TH STREET N 8270 63RD WAY NORTH CLEARWATER, FL 33762 US PINELLAS PARK, FL 33781 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: HEATHER H. HAIRE 04/29/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition ARTHUR, ROBERT J ARTHUR, ROBERT J Name:

Name: 12991 44TH STREET N 3201 118TH AVENUE N. - UNIT 7 Address: Address:

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: CLEARWATER, FL 33762

Title: VD () Delete Title: VD (X) Change () Addition

Name: HAIRE, HEATHER H Name: HAIRE, HEATHER H 3855 43RD TERRACE NORTH Address: 8270 63RD WAY NORTH Address: ST. PETERSBURG, FL 33714 PINELLAS PARK, FL 33781 City-St-Zip: City-St-Zip:

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: HEATHER H. HAIRE VD 04/29/2008