


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90090 006 ***150.00

DOCUMENT # P98000038422			
1. Entity Name RUNNING DEER LODGE, INC			
Principal Place of Business 3405 E. STAGECOACH TRAIL INVERNESS FL 34452		Mailing Address 3405 E. STAGECOACH TRAIL INVERNESS FL 34452	
2. Principal Place of Business 11043 S. RUNNING Suite, Apt. #, etc. DEER POINT		3. Mailing Address 11043 S. RUNNING Suite, Apt. #, etc. DEER POINT	
City & State INVERNESS		City & State INVERNESS	
Zip FL	Country 34452	Zip FL	Country 34452
6. Name and Address of Current Registered Agent HILL, SUSANNE 3405 E. STAGECOACH TRAIL INVERNESS FL 34452		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS HILL, SUSANNE 3405 E. STAGECOACH TRAIL INVERNESS FL 34452 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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1st MOORE CR2E034 (10/05)

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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.

SIGNATURE: Susanne Hill SUSANNE HILL Date: 2/15/06 Daytime Phone #: 352 860 1791