

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 12, 2007
Secretary of State**

DOCUMENT# N05000007183

Entity Name: S.T.A.R.S. OF WEST ORANGE, INC.

Current Principal Place of Business:

2188 ALCLOBE CIRCLE
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2188 ALCLOBE CIRCLE
OCOEE, FL 34761

New Mailing Address:

FEI Number: 20-3574921 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEMBROOKE, CHESTA
2188 ALCLOBE CIRCLE
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P, D () Delete
Name: HEMBROOKE, CHESTA M
Address: 2188 ALCLOBE CIRCLE
City-St-Zip: OCOEE, FL 34761

Title: TD () Delete
Name: HEMBROOKE, JOSEPH C
Address: 2188 ALCLOBE CIRCLE
City-St-Zip: OCOEE, FL 34761

Title: SVD () Delete
Name: ROBERTSON, BARBARA
Address: 17325 RAINTREE COURT
City-St-Zip: MONTVERDE, FL 34756

Title: D () Delete
Name: ANTHONY, RUTH ANNE
Address: 1508 FULLER CROSS ROAD
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: CAMPBELL, VALERIE
Address: 10427 SMOKERISE LANE
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: CANNON, LINDA
Address: 10510 EAGLES BLUFF COURT
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHESTA M. HEMBROOKE

P.D.

01/12/2007

Electronic Signature of Signing Officer or Director

Date