

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90859 012 ***150.00

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1. Entity Name
ALL-STAR ACADEMY, INC.



40094115



04242007 Chg-P CR2E034 (12/06)

Principal Place of Business
315 STAN DR
STE 5 & 6
W. MELBOURNE, FL 32904 US

Mailing Address
315 STAN DR
STE 5 & 6
W. MELBOURNE, FL 32904 US

2. Principal Place of Business - No P.O. Box #
415 MARTIN RD. SE
Suite, Apt. #, etc.

3. Mailing Address
415 MARTIN RD SE
Suite, Apt. #, etc.

City & State
Palm Bay
Zip
32909
Country
USA

City & State
Palm Bay
Zip
32909
Country
USA

4. FEI Number
59-2892031
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ROSACI, M. JOAN
315 STAN DR
STE 5 & 6
MELBOURNE, FL 32904

7. Name and Address of New Registered Agent

Name
M. JOAN ROSACI
Street Address (P.O. Box Number is Not Acceptable)
415 MARTIN RD. SE.
City
Palm Bay FL Zip Code
32909

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
ROSACI, M. JOAN
1765 SANDYCREEK LN.
MALABAR, FL 32904 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP
JASZKOWIAK, JESSICA
4854 ERIN LN
MELBOURNE, FL 32940 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
ROSACI, M. JOAN
1765 SANDYCREEK LN.
MALABAR, FL 32950 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREASURER
APRIL Cummings
131 CYPRESS BROOK CIR. #916
MELBOURNE, FL 32901 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP & MARKETING
JAMIE L. PATTERSON
996 ESSEN AVE. N.W.
PALM BAY, FL 32907 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
LEANNE ROSACI
1765 SANDY CREEK LN.
MALABAR, FL 32950 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: **M. JOAN ROSACI** **M. JOAN ROSACI** **321-480-7989**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **President** **4/27/07**
Date Daytime Phone #