

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000000599

FILED  
Feb 22, 2012  
Secretary of State

**Entity Name:** ALLSTAR MANUFACTURED HOUSING, INC.

**Current Principal Place of Business:**

5325 S PINE AVE  
OCALA, FL 34480

**New Principal Place of Business:**

**Current Mailing Address:**

5325 S PINE AVE  
OCALA, FL 34480

**New Mailing Address:**

FEI Number: 87-0716985

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KINDER, GREGORY D  
5325 S PINE AVE  
OCALA, FL 34480 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: S  
Name: KINDER, GREGORY  
Address: 5450 SE 44TH AVE  
City-St-Zip: Ocala, FL 34480

Title: PRES  
Name: KINDER, GREGORY  
Address: 5450 SE 44TH AVE  
City-St-Zip: Ocala, FL 34480

Title: VP  
Name: KINDER, GREGORY  
Address: 5450 SE 44TH AVE  
City-St-Zip: Ocala, FL 34480

Title: TREA  
Name: KINDER, GREGORY  
Address: 5450 SE 44TH AVE  
City-St-Zip: Ocala, FL 34480

I hereby 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 all other like empowered.

SIGNATURE: GREGORY KINDER

PRES

02/22/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date