

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000004281

**Entity Name:** DAYSTAR LIFE CENTER, INC.

**Current Principal Place of Business:**

226 SIXTH STREET SOUTH  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

226 SIXTH STREET SOUTH  
ST PETERSBURG, FL 33701 US

**FEI Number:** 65-0523539

**Certificate of Status Desired:** No

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

DIVITO, JOSEPH AESQ.  
4514 CENTRAL AVENUE  
SAINT PETERSBURG, FL 33711 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CS  
Name BENNETT, LINDA  
Address 5505 LA PUERTA DEL SOL BLVD, #128  
City-State-Zip: SAINT PETERSBURG FL 33715

Title RS  
Name HARRIS RAZOR, PATRICIA  
Address 4730 NEPTUNE DRIVE SE  
City-State-Zip: ST PETERSBURG FL 33705

Title PRESIDENT  
Name CORTESE, JOE  
Address 1204 HUNTINGTON LANE  
City-State-Zip: SAFETY HARBOR FL 34695

Title TREASURER  
Name WERNER, JOSEPH J  
Address 5729 LA PUERTA DEL SOL BLV'D #181  
City-State-Zip: SAINT PETERSBURG FL 33715

Title T  
Name MALL, ROBERT  
Address 4983 BACOPA LANE SOUTH  
City-State-Zip: SAINT PETERSBURG FL 33715

Title VP  
Name WIENER, STEPHEN DR.  
Address 1055 SIXTH STREET EAST  
City-State-Zip: TREASURE ISLAND FL 33706

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

**SIGNATURE:** JOSEPH WERNER

**TREASURER**

**01/24/2013**

Electronic Signature of Signing Officer/Director Detail

Date