

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002082

**Entity Name:** FIVE STAR MAGNET PROGRAM, INC.

**Current Principal Place of Business:**

4245 HOLLY DRIVE  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

4245 HOLLY DRIVE  
PALM BEACH GARDENS, FL 33410

**FEI Number:** 65-0615755

**Certificate of Status Desired:** Yes

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

FALK, ARTY  
4245 HOLLY DR  
PALM BEACH GARDENS, FL 33410 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 CHAIRMAN  
Name SIMMS, MIKE  
Address 4245 HOLLY DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title VC  
Name WARD, JAMES  
Address 4245 HOLLY DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title T  
Name RUBINS, JONATHAN  
Address 4245 HOLLY DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title SECRETARY  
Name LAWLESS, ROSEMARY  
Address 4245 HOLLY DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title D  
Name FALK, ARTY  
Address 4245 HOLLY DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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:** ARTY FALK

**EXECUTIVE DIRECTOR**

**02/07/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date