

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000000599

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

**Current Principal Place of Business:**

5325 S PINE AVE  
OCALA, FL 34480

**Current Mailing Address:**

5325 S PINE AVE  
OCALA, FL 34480

**FEI Number: 87-0716985**

**Certificate of Status Desired: No**

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

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

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

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

Title TREA  
Name KINDER, GREGORY  
Address 5450 SE 44TH AVE  
City-State-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 D. KINDER**

**PRESIDENT**

**01/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date