FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **647837** **(4)**

1. Corporation Name

5 STAR INC.

Principal Place of Business

6630 WESTWOOD ACRES ROAD
FT MYERS FL 33905

Mailing Address

6630 WESTWOOD ACRES ROAD
FT MYERS FL 33905

3. Date Incorporated or Qualified: **12/11/1979**

3a. Date of Last Report: **03/21/1995**

4. FEI Number: **59-1959182** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business

21 | 22 | 23 | 24 | 25

2a. Mailing Address

26 | 27 | 28 | 29 | 30

9. Name and Address of Current Registered Agent

FLINT, WILLIAM W
6630 WESTWOOD ACRES ROAD
FT. MYERS FL 33905

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ Date

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1 TITLE	☐ Change ☐ Addition
NAME	FLINT, WILLIAM		2 NAME	
STREET ADDRESS	6630 WESTWOOD ACRES ROAD		3 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS, FL 00000		4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	5 TITLE	☐ Change ☐ Addition
NAME	RICH, LARRY		6 NAME	
STREET ADDRESS	4910 SKATES CIRCLE		7 STREET ADDRESS	
CITY-ST-ZIP	FT MYERS, FL 00000		8 CITY-ST-ZIP	
TITLE	S	☐ DELETE	9 TITLE	☐ Change ☐ Addition
NAME	FLINT, CONNIE		10 NAME	
STREET ADDRESS	6630 WESTWOOD ACRES ROAD		11 STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS FL		12 CITY-ST-ZIP	
TITLE	T	☐ DELETE	13 TITLE	☐ Change ☐ Addition
NAME	RASNAKE, FREDERICK		14 NAME	
STREET ADDRESS	111 NORTH OREGON ROAD		15 STREET ADDRESS	
CITY-ST-ZIP	LEHIGH ACRES FL		16 CITY-ST-ZIP	
TITLE		☐ DELETE	17 TITLE	☐ Change ☐ Addition
NAME			18 NAME	
STREET ADDRESS			19 STREET ADDRESS	
CITY-ST-ZIP			20 CITY-ST-ZIP	
TITLE		☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME			22 NAME	
STREET ADDRESS			23 STREET ADDRESS	
CITY-ST-ZIP			24 CITY-ST-ZIP	

CR2E034 (12/95)

14. I hereby certify that the information supplied with this filing is accurate, and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or added above or on an attachment with an address.

SIGNATURE: Connie Flint Connie Flint, Secretary 1/25/96 (941)334-6334
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone Number