2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# 728473

Entity Name: TWINKLE STAR CENTER, INCORPORATED

Current Principal Place of Business:

238 AMELIA AVENUE
DELAND, FL 32721 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1748
DELAND, FL 32721 US

New Mailing Address:

FEI Number: 59-1524211 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, HELEN
612 CYPRESS OAK CIRCLE
DELAND, FL 32724 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:	CP	( ) Delete
Name:	HARRIS, HELEN D	
Address:	612 CYPRESS OAK CIRCLE	
City-St-Zip:	DELAND, FL 32724	
Title:	VC	( ) Delete
Name:	GIBSON, MONICA	
Address:	57B LOUISIANA DRIVE	
City-St-Zip:	PALM COAST, FL 32137	
Title:	BM	( ) Delete
Name:	MILLS, JEANETTA	
Address:	1750 SANTEE AVE.	
City-St-Zip:	DELTONA, FL 32738	
Title:	BM	( ) Delete
Name:	GIBSON, ROSA	
Address:	701 W. NEW HAMPSHIRE AVE	
City-St-Zip:	DELAND, FL 32724	
Title:	S	( ) Delete
Name:	WYCHE, KATHY	
Address:	612 CYPRESS OAK CIRCLE	
City-St-Zip:	DELAND, FL 32720	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HELEN HARRIS DIRE 04/27/2009

Electronic Signature of Signing Officer or Director — Date