

FILED
Mar 17, 2003 8:00 am
Secretary of State

02-06-2003 90118 048 ****70.00

2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728473			
1. Entity Name TWINKLE STAR CENTER, INCORPORATED			
Principal Place of Business 302 SOUTH GARFIELD DELAND FL 32724 US		Mailing Address P.O. BOX 1748 DELAND FL 32721-1748 US	
2. Principal Place of Business 238 S. Amelia ave. Suite, Apt. #, etc.		3. Mailing Address P.O. Box 1748 Suite, Apt. #, etc.	
City & State Deland, Fla.		City & State Deland, Fla.	
Zip 32721		Country Volusia	
4. FEI Number 59-1524211		Applied For ☐ Not Applicable	
5. Certificate of Status Desired		☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COLLINS, THADDEUS L 559 DR MARY M. BETHUNE BLVD DAYTONA BEACH FL 32114		7. Name and Address of New Registered Agent Name: Helen Harris Street Address (P.O. Box Number is Not Acceptable) 238 S. Amelia City: Deland FL Zip Code: 32721	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Helen Harris</u> DATE: <u>1/27/03</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO COLLINS, THADDEUS L. 218 GEORGETOWN DAYTONA BEACH FL	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO YOUNG, ERICK 997 HUGO CIRCLE DELTONA FL 32738	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, VIRGINIA 238 S. AMELIA DELAND FL	☒ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ADAMS, DORIS 380 S DOSTON AVE DELAND FL	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PA Dale Warren 1015 S. Beach St. Daytona Beach FL 32114	☐ Delete	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	E Elizabeth McRae P.O. Box 1411 Deland, FL 32721	☐ Delete	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Thaddeus L. Collins</u>		Date: _____ Daytime Phone # _____	