

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F03000003326

FILED
Mar 11, 2006
Secretary of State**Entity Name:** WHITE STAR DEVELOPMENT INC**Current Principal Place of Business:**16812 TOLEDO BLADE BLVD
PORT CHARLOTTE, FL 33953**New Principal Place of Business:****Current Mailing Address:**6400 REDWOOD DRIVE SUITE 200
ROHNERT PARK, CA 94928 US**New Mailing Address:****FEI Number:** 42-1591726**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STILLWAGON, JOE
16812 TOLEDO BLADE BLVD.
PORT CHARLOTTE, FL 33953 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: PD () Delete
Name: STILLWAGON, JOSEPH
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP () Delete
Name: BURKE, DANIEL
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: SEC () Delete
Name: BURKE, VICTORIA
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: TREA () Delete
Name: STILLWAGON, ROICE
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: DIR (X) Delete
Name: SMITH, DOUG
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STILLWAGON, JOSEPH
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: V (X) Change () Addition
Name: STILLWAGON, JOSEPH
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: S (X) Change () Addition
Name: STILLWAGON, JOSEPH
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: T (X) Change () Addition
Name: STILLWAGON, JOSEPH
Address: 16812 TOLEDO BLADE BLVD
City-St-Zip: PORT CHARLOTTE, FL 33953

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH STILLWAGON

P

03/11/2006

Electronic Signature of Signing Officer or Director

Date