2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004604

FILED Mar 29, 2009 Secretary of State

Entity Name: AN ORPHAN'S BRIGHT STAR, INC.

Current Principal Place of Business: New Principal Place of Business: 431 BISCAYNE BLVD EL LAGO, TX 77586 **Current Mailing Address: New Mailing Address:** 431 BISCAYNE BLVD EL LAGO, TX 77586 FEI Number: 20-5392557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOMEZ, JOY 100 CAMERON DRIVE WESTON, FL 33326 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PED () Change () Addition () Delete DAVIS, MINDI Name: Name: 431 BISCAYNE BLVD Address: Address: City-St-Zip: EL LAGO, TX 77586 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GALLIGAN, ELIZABETH AED Name: Address: 3119 BRAZIL LAKE PKWY Address: City-St-Zip: GEORGETOWN, IN 47122 City-St-Zip: Title: () Delete Title: (X) Change () Addition ANDREWS, CRISTIN Name: ANDREWS, CRISTIN Name: 18002 STONEY GLAD CT 18002 STONEY GLADE CT Address: Address: City-St-Zip: HOUSTON, TX 77095 City-St-Zip: HOUSTON, TX 77095 Title: () Delete Title: () Change () Addition COLE, AMANDA Name: Name: 3300 PEBBLEBROOK DR #43 Address: Address: City-St-Zip: SEABROOK, TX 77586 City-St-Zip: Title: Title: () Delete () Change () Addition SKOBEL, JILL Name: Name: 939 KNOTTY ELMWOOD TRAIL Address: Address: City-St-Zip: HOUSTON TX 77602 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: MINDI DAVIS PED 03/29/2009