

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F40491

FILED  
Jan 29, 2009  
Secretary of State

Entity Name: STAR LAKE LOT 70 PRIVATE ROAD, INC.

## Current Principal Place of Business:

1622 STAR LAKE PLACE  
PENSACOLA, FL 32507 US

## New Principal Place of Business:

## Current Mailing Address:

1622 STAR LAKE PLACE  
PENSACOLA, FL 32507 US

## New Mailing Address:

FEI Number: 59-2892732      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WINN, H. FRANK JR  
322 S ALCANIZ ST  
PENSACOLA, FL 32502 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DOYLE, PETER  
Address: 1616 STAR LAKE PLACE  
City-St-Zip: PENSACOLA, FL 32507 US

Title: VD ( ) Delete  
Name: PATTON, WILLIAM T  
Address: 1610 STAR LAKE PLACE  
City-St-Zip: PENSACOLA, FL 32507 US

Title: STD ( ) Delete  
Name: MOORE, CALVIN  
Address: 1622 STAR LAKE PLACE  
City-St-Zip: PENSACOLA, FL 32507 US

Title: D ( ) Delete  
Name: ANTONETTI, EMILIO  
Address: 1618 STAR LAKE PLACE  
City-St-Zip: PENSACOLA, FL 32507 US

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CALVIN B. MOORE

STD

01/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date