FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F97000001649**1. Corporation Name

LODESTAR REALTY, INC.

Mailing Address

218 U.S. HWY #1 SUITE 300

218 U.S. HWY #1 SUITE 300

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90155 049 ***150.00



TEQUESTA FL 33469		TEQUESTA FL 33469				DO NOT WRITE IN THIS SPACE					
				3. Dat	3. Date Incorporated or Qualifed						
					03/	/31/1997					
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI	Number			App	lied For	
21		26			AP	PLIED FOR	- 65-07	14/16	2 Not	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				tifcate of Status	_		\$8.75 A	dditional	
22		27			s. cer	urcate or status	Desiled (Fee Re	quired	
City & State	•	City & State			6. Elec	ction Campaign	Financing	\neg	\$5.00	May Be	
23		28			Trus	st Fund Contrib	ution '		Added to	Fees	
Zip Country Zip			Country		8. This	s corporation ov	ves the current			_	
24	25	29 30	<u> </u>			sonal Property				□No	
	9. Name and Address of Current	Registered Agent	04			me and Addres		jistered A	gent		
O T OORDONATICAL OVOTER				81 Name DICKIE, PAUL A.							
C T CORPORATION SYSTEM				82 Street Address (P.O. Box Number is Not Acceptable)							
1200 SOUTH PINE ISLAND ROAD				_21	18 U.S.	HWY #	<u> </u>	ÚITE	<u> 300</u>		
PLAN	ITATION FL 33324		83			,					
			84	City					85 Zip C	ode	
				7	EQUEST	Γ <i>A</i>		<u> </u>	33	469	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
agent. I ar	m familiar with, and accept the obligati	ions of, Section 607.0505, Florida	Statutes.	oo. po	3.01.3.7.0.200.0	V. G., CO. , C.		,		'	
SIGNATURE	Bul		PAU	LA.	. DICKI	<u> </u>	4/28	199			
	Signature, typed or printed name of registered agent			signature re	equired when reinstal	ting) ITIONS/CHANG	/ / CER TO OFFIC	DATE AND	DIDECTO	DC IN 12	
12.	OFFICERS AND	D DIRECTORS	13.		V	THONS/CHANC	SES TO OFFIC		Change	Addition	
TITLE	D/S	□ SELETE	=		1 •	PAUL W	١	Į.			
NAME	BYRNE, THOMAS F		1.2 NAME		30011	S. HWY	, ⊭-1 S/U	TE 20	\sim		
STREET ADDRESS	218 U.S. HWY #1 SUITE 300		1.3 STREET	i	2/8 U.	3. HWY7	, 000/	0			
CITY-ST-ZIP	TEQUESTA FL 33469	☐ DELETE	1.4 CITY-ST 2.1 TITLE	- ZIP	TEQUE	57A F	- 3346	· 7	Change	Addition	
TITLE	D/C	Deceie			DIP	0.	٨	ļ	Ca on ango		
NAME	DICKIE, PAUL A		2.2 NAME		DICKIE	PAUL	/1. 	^	_		
STREET ADDRESS	218 U.S. HWY #1 SUITE 300		2.3 STREET		218 U.S	218 U.S. HWY# 1 SUIT TEQUESTA FL 3346		TE 3	00		
CITY-ST-ZIP	TEQUESTA FL 33469	DELETE.	2. 4 CITY-S	r-zip		STA F	L 334	69	Change	Addition	
TITLE	D/P	t y z ∪ece ie	3.1 TITLE		D/T						
NAME	GIBBS, RONALD L		3.2 NAME		mcses	E, NANC .s. Hwy	YE -		0		
STREET ADDRESS	218 U.S. HWY #1 SUITE 300		3.3 STREET		218 U.	.s. Hwy	141 30	111E	300		
CITY-ST-ZIP	TEQUESTA FL 33469	☐ DELETE	3.4. CITY-S	I-ZIP	150ne	STA FL	334		Change	Addition	
TITLE	D/V	☐ DEFE!E	4.1 TITLE						L. Criange		
NAME	PATTON, GEORGE E		4. 2 NAME								
STREET ADDRESS	218 U.S. HWY #1 SUITE 300		4.3 STREET								
CITY-ST-ZIP	TEQUESTA FL 33469	DELETE	4.4 CITY-ST	-ZIP				i	Change	Addition	
TITLE	D	Γ № ΛΕΓΕΙΕ	5.1 TITLE 5.2 NAME					!			
NAME	WILSON, JAMES G		5.3 STREET	ADDBESS							
STREET ADDRESS	218 U.S. HWY #1 SUITE 300		5.4 CITY-ST	1							
CITY-ST-ZIP	TEQUESTA FL 33469	☐ OELETE	61 TITLE	- ZIP				ĺ	Change	Addition	
TITLE	T		62 NAME								
NAME	MCGEE, NANCY E		6.3 STREET	ADDDESS							
STREET ADDRESS	218 U.S. HWY #1 SUITE 300		0.3 STREET	AUDKESS							

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered. TEQUESTA FL 33469

SIGNATURE: