2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F99000003066

1. Entity Name

NORTH STAR COMMUNICATIONS GROUP, INC.



FILED Jul 20, 2007 08:00 AN Secretary of State

Principal Place of Business

e of Business Mailing Address

1900 INTERNATIONAL PARK DRIVE BIRMINGHAM, AL 35243

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

1900 INTERNATIONAL PARK DRIVE BIRMINGHAM, AL 35243



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

07162007

No Chg-P

CR2E034 (11/05)

4. FEI Number 52-2069280

Applied For Not Applicable

\$8.75 Additional Fee Required

5. Certificate of Status Desired

DO NOT WRITE

PLANTATION, FL 33324				IN THIS SPACE			
	named entity submits this statement for the ions of registered agent.	purpose of changing its re	gistered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and acce	pt	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered				required when reinstating)	DATE		
	LE NOW!!! FEE IS \$150.00 ue by September 14, 2007	9. Election Campaign Trust Fund Contrib	• –	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD GOODRICH, T.M. 2000 INTERNATIONAL PARK DRIVE BIRMINGHAM, AL 35243			1. 14.	07/20/07-80001-013 150.00		
TITLE NAME STREET ADDRESS	PD JOHNSON, W.G. JR 1900 INTERNATIONAL PARK DR.				07/20/07-80001-013 150.00		

DO NOT WRITE

IN THIS SPACE

CITY-ST-ZIP BIRMINGHAM, AL 35243 TITLE CASSADY, G E NAME STREET ADDRESS 908 LINWOOD RD. CITY-ST-ZIP BIRMINGHAM, AL 35222 TITLE DANIEL, JAMES E NAME STREET ADDRESS 2027 KNOLLWOOD PLACE CITY-ST-ZIP BIRMINGHAM, AL 35242 TITLE SMITH, CYLDE M NAME STREET ADDRESS 2000 INTERNATIONAL PARK DRIVE BIRMINGHAM, AL 35243 CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADORESS CITY-ST-ZIP

HIGHATURE AND TYPED OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

7-16-07 (205)972-5340