## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #**

Principal Place of Business

F9900003066

1. Entity Name

NORTH STAR COMMUNICATIONS GROUP, INC.



Mar 31, 2003 8:00 am Secretary of State

**FILED** 

03-31-2003 90312 006 \*\*\*150.00

BIRMINGHAM		A DHIVE	BIRMINGHAM AL 35243									
2. Principal Place of Business			3. Mailing Address					10110 IBIH 00171 00		ALDA IZIZI BOZIQ B		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & Stat	e		City & State				4. FEI Number 52-2069280 Applied For Not Applicable					
Zip		Country	Zip	Counti	Country		. Certificate of S	Status Desired		\$8.75 Add	litional	
	and Address of Current F			7.	. Name and Add	dress of New F	Registered A	Agent				
	~		Name.									
CORPORATION SERVICE COMPANY					Street Address (P.O. Box Number is Not Acceptable)							
1201 HAY	s street			- Street Address			. Dox (4giriber is	Not Acceptable	-, 			
TALLAHASSEE FL 32301-2525												
					City				FL	Zip Code	9	
8. 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. I am familiar with, and accept the obligations of registered agent.												
the obligations of registered agent.												
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
FILE NOW!!! FEE IS \$150.00  9. Election Campaign Financing \$5.00 May Be												
		3 Fee will be \$550.00				Trust F	und Contributio	on. Č		to Fees		
Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS							ADDITIONS (CH	ANGES TO GE	EICEDS AND	DIRECTOR	2181.41	
TITLE	CD	OFFICERS AND L	Delete	11.		ADDITIONS/CHANGES TO OFFICE			ICENS AND	☐ Change	Addition	
NAME	GOODRICH, T.M.		□ Détete	NAME								
STREET ADDRESS	2000 INTE	E	STREE	T ADDRESS								
CITY-ST-ZIP	BIRMINGH	AM AL 35243		CITY-	ST-ZIP							
TITLE	EVPD		☐ Delete	TITLE						Change	Addition	
NAME	COONS, G.D.			NAME			um at	h Di was	_			
STREET ADDRESS		H AVE., NE STE. 201			T ADDRESS	4318	NE 7t	ONL	Ea			
CITY-ST-ZIP		WA 98005		CITY-	ST-ZIP	KENTO	M, WA	780				
,T <u>i</u> tle <sub>.</sub> Name	PD  Johnson	W C ID	Delete		F	س دخد	7		_	Change	☐ Addition	
STREET ADDRESS		, W.G. JA RNATIONAL PARK DRIV	F		T ADDRESS	1900	INTERNA	HIDNAL	PARK	DRIVE		
CITY-ST-ZIP		AM AL 35243	_	CITY-	ST-ZIP .	BIRM	ING HAM	AZ	352	43		
TITLE	S		☐ Delete	TITLE				<del>/</del>		Change	☐ Addition	
NAME	CASSADY,			NAME							ì	
STREET ADDRESS	908 LINW				T ADDRESS						}	
CITY-ST-ZIP	BIRMINGH	AM AL 35222		CITY-S	ST-ZIP							
TITLE	T	1000011.0	☐ Delete	TITLE		•				Change	☐ Addition	
NAME STREET ADDRESS		JOSEPH S		NAME	. 10000000							
STREET ADDRESS CITY-ST-ZIP		RIDGE CIRCLE AM AL 35242		CITY-S	FADDRESS ST-71P							
TITLE	DILIMITACI	THE VOLTE	□ Delete	TITLE						☐ Change	Addition	
NAME	SMITH, CY	LDE M	∟ Delete	NAME								
STREET ADDRESS		RNATIONAL PARK DRIV	E		ADDRESS							
CITY-ST-ZIP BIRMINGHAM AL 35243				CITY-S	ST-ZIP	•						

2. 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 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

ASIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/03

205-772-69/0 <a href="#">205-772-69/0</a> CR2E034 (10/02