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FILED
Jun 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H13104

(5)

1. Corporation Name

LODESTAR TOWERS, INC.

Principal Place of Business

630 US HWY. ONE
SUITE 403
NORTH PALM BEACH FL 33408
US

Mailing Address

P.O. BOX 14485
NORTH PALM BEACH FL 33408-0485
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 218 U.S. HIGHWAY #1

Suite, Apt. #, etc.

22 300

City & State

23 TEQUESTA, FLORIDA

Zip

Country

24 33469

25

U.S.A.

2a. Mailing Address

26 218 U.S. HIGHWAY #1

Suite, Apt. #, etc.

27 300

City & State

28 TEQUESTA, FLORIDA

Zip

Country

29 33469

30

U.S.A.

3. Date Incorporated or Qualified

07/20/1984

4. FEI Number

59-2453432

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

Yes No

10. Name and Address of New Registered Agent

GIBBS, RONALD
18870 PAINTED LEAF CT.
JUPITER FL 33458

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 City

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature typed or printed name of registered agent and date applied for

(If Other Registered Agent, signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

SD
BYRNE, THOMAS F.

STREET ADDRESS

8 KING ST., EAST

CITY-ST-ZIP

TITLE

DV
PAUL, DICKIE

STREET ADDRESS

514 CHARTWELL RD.

CITY-ST-ZIP

TITLE

DCE
WILSON, JIM

STREET ADDRESS

14440 CHERRY LANE CT.

CITY-ST-ZIP

TITLE

PD
GIBBS, RONALD L.

STREET ADDRESS

18870 PAINTED LEAF CT.

CITY-ST-ZIP

TITLE

AS
SALIE, DONALD

STREET ADDRESS

630 U.S. HWY ONE

CITY-ST-ZIP

TITLE

DV
PATTON, GEORGE

STREET ADDRESS

514 CHARTWELL RD.

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D/S
BYRNE, THOMAS F.

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

D/C
DICKIE, PAUL A.

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

D
WILSON, G. JAMES

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

D/P
GIBBS, RONALD L.

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

T
McGEE, NANCY E.

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

D/V
PATTON, GEORGE E.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 on an attachment with an address.

CR2E034 (10/97)