

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # K83880

1. Entity Name
FIVE STAR PROPERTY MANAGEMENT, INC.



Principal Place of Business

FIVE STAR PROPERTY
6233 A1A SOUTH
SAINT AUGUSTINE, FL 32080

Mailing Address

6233 A1A SOUTH
SAINT AUGUSTINE, FL 32080



04172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEL Number 59-2957809 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GEIB, SANDRA
6233 A1A SOUTH
ST. AUGUSTINE, FL 32080

**DO NOT WRITE
IN THIS SPACE**

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

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
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GEIB, SANDRA
STREET ADDRESS	6233 A1A SOUTH
CITY-ST-ZIP	ST. AUGUSTINE, FL
TITLE	VPS
NAME	GEIB, SANDRA A
STREET ADDRESS	6233 A1A SOUTH
CITY-ST-ZIP	ST AUGUSTINE, FL 32080
TITLE	T
NAME	GEIB, SANDRA A
STREET ADDRESS	6233 A1A SOUTH
CITY-ST-ZIP	ST AUGUSTINE, FL 32080
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/06/08-80051-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:

Sandra Geib SANDRA GEIB

4/17/08

904-471-9750

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #