2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 08, 2005
Secretary of State

DOCUMENT# L01000018627

Entity Name: STAR MANAGEMENT, LLC

Current Principal Place of Business:

1003 GREENRIDGE ROAD
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

PO BOX 217
PENFIELD, NY 14623

New Mailing Address:

FEI Number: 90-0023293 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHMIDT, KENT H
1003 GREENRIDGE ROAD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	BERGERON, BRIAN	
Address:	4 D'ANGELO DR.	
City-St-Zip:	WEBSTER, NY 14580	
Title:	MGRM	( ) Delete
Name:	SCHMIDT, KENT H	
Address:	1003 GREENRIDGE RD.	
City-St-Zip:	JACKSONVILLE, FL 32207	
Title:	MGRM	( ) Delete
Name:	SEAY, EVERETTE	
Address:	1026 RIVIERA STREET	
City-St-Zip:	JACKSONVILLE, FL 32207	
Title:	MGRM	( ) Delete
Name:	SCHMIDT, MICHAEL	
Address:	1003 GREENRIDGE RD.	
City-St-Zip:	JACKSONVILLE, FL 32207	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN M BERGERON MM 09/08/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date