

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L01835

FILED  
Jun 09, 2006  
Secretary of State

Entity Name: FIVE-STAR PROPERTIES OF BAY COUNTY, INC.

**Current Principal Place of Business:**

17785 BACK BEACH RD  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

2109 PALOMA ST.  
NAVARRE, FL 32566

**Current Mailing Address:**

17785 BACK BEACH RD  
PANAMA CITY BEACH, FL 32413

**New Mailing Address:**

104 LOBLOLLY CT.  
PANAMA CITY BEACH, FL 32413

FEI Number: 59-2957662

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ARISTIDES GOMEZ  
520 BECKRICH RD  
APT 1214  
PANAMA CITY BEACH, FL 32407 US

**Name and Address of New Registered Agent:**

ARISTIDES GOMEZ  
104 LOBLOLLY CT.  
PANAMA CITY BEACH, FL 32413 US

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: ARISTIDES GOMEZ

06/09/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GOMEZ, JULIO,  
Address: 520 BECKRICH ROAD #1214  
City-St-Zip: PANAMA CITY BEACH, FL

Title: D ( ) Delete  
Name: GOMEZ, ROSA C.,  
Address: 520 BECKRICH ROAD #1214  
City-St-Zip: PANAMA CITY BEACH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: GOMEZ, JULIO,  
Address: 104 LOBLOLLY CT.  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: D (X) Change ( ) Addition  
Name: GOMEZ, ROSA C.,  
Address: 104 LOBLOLLY CT.  
City-St-Zip: PANAMA CITY BEACH, FL 32413

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARISTIDES GOMEZ

D

06/09/2006

Electronic Signature of Signing Officer or Director

Date