2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032557

City-St-Zip:

HILLSBORO BEACH, FL 33062

Entity Name: AUTHENTIC STARS, LLC

FILED Jan 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 13000 SAWGRASS VILLAGE STE #41 PONTE VEDRA BEACH, FL 32082 **Current Mailing Address: New Mailing Address:** PO BOX 3091 PONTE VEDRA BEACH, FL 320043091 FEI Number: 83-0368907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRASER, THOMAS J JR 240 PONTE VEDRA PARK DRIVE STE. 150 PONTE VEDRA BEACH, FL 32082 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/MEMBERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete HAWKINS, JOE K Name: Name: 9050 MARSH VIEW CT Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: HAMMEL, TERRY A Name: Address: 1080 NE 28TH AVE Address: City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: Title: MGR () Delete Title: () Change () Addition STRICKLAND, MICHAEL T Name: Name: 5520 RIVER POINT CIR Address: Address: City-St-Zip: KNOXVILLE, TN 37919 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BATTLE, PATRICK Name: STE 200 290 INTERSTATE N Address: Address: City-St-Zip: ATLANTA, GA 30339 City-St-Zip: Title: MGR () Delete Title: () Change () Addition SNOTTE, BRIAN Name: Name: 1135 HILLSBURG MILE Address: Address:

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.

City-St-Zip:

SIGNATURE: JOE HAWKINS MGR 01/13/2005