

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037867

FILED
Apr 28, 2005
Secretary of State

Entity Name: NORTHSTARS INVESTMENT PARTNERS, LLC

Current Principal Place of Business:

P.O. BOX 2612
PALM CITY, FL 34991

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2612
PALM CITY, FL 34991

New Mailing Address:

FEI Number: 20-0289445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODGERS, J. MARK
2053 SW OAKWATER POINTE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

RODGERS, J. MARK
1730 SW CRANE CREEK AVE.
PALM CITY, FL 34990 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: J. MARK RODGERS

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: RODGERS, J. MARK
Address: P.O. BOX 2612
City-St-Zip: PALM CITY, FL 34991

Title: MGR (X) Delete
Name: O'BRIEN, KEITH
Address: P.O. BOX 2612
City-St-Zip: PALM CITY, FL 34991

Title: MGR (X) Delete
Name: MILO, JOE
Address: P.O. BOX 2612
City-St-Zip: PALM CITY, FL 34991

Title: MGR () Delete
Name: FLEMING, GARY
Address: P.O. BOX 2612
City-St-Zip: PALM CITY, FL 34991

Title: MGR () Delete
Name: FLEMING, CARL
Address: P.O. BOX 2612
City-St-Zip: PALM CITY, FL 34991

Title: MGR (X) Delete
Name: BOYD, RON
Address: P.O. BOX 2612
City-St-Zip: PALM CITY, FL 34991

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
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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: J. MARK RODGERS

MGR

04/28/2005

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