2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED SECRETARY OF STATE PROPATIONS DOCUMENT # L03000042366 05 SEP 30 AM 8:53 1. Entity Name NORTHERN STARS, LLC Mailing Address Principal Place of Business 1811 NO. DIXIE HIGHWAY 1811 NO. DIXIE HIGHWAY WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407 07062005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0360640 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRAY, LARRY E DO-NOT-WRITE 2247 PALM BEACH LAKES BLVD., SUITE 229 WEST PALM BEACH, FL 33409 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE LUNEBURG, KAREN NAME STREET ADDRESS 18 LOWER CROSS ROAD 300060604013 10/14/05--01006--015 **50.00 CITY-ST-ZIP GREENWICH, CT 06831 TITLE NAME STREET ADDRESS REINSTATIENTENT 2005 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

11. I bereby certify that the information supplied with this filing does not qualify 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 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 of the receiver or trustee employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 1 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRE

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