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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L15518

(8)

FILED
May 08 1997 8:00am
Secretary of State

STAR DEVELOPMENT, INC.  Principal Place of Business  NANCY A. ROSSMAN 7829 GREENBRIAR PARKWAY ORLANDO FL 32819		Mailing Address Nancy A. Rossman 7829 Greenbriar Parkway Orlando Fl 32819-8326				
				3. Date Incorporated or Qualified 09/13/1989	3a. Date of Last R 03/01/1996	вероц
2. Principal f	Piace of Business	2a. Mailing Address		4. FEI Number		oplied For
15		26		59-2973681	No.	ot Applicable
	55 MetroWest Blvd.	su6355 MetroW		5. Certificate of Status Desired	, , , , , , , , , , , , , , , , , , ,	Additional equired
City & Sta	Suite 330	City & State	330	6 Floation Compains Financing		
(3)	indo, Florida 32835	C'Örlando, Flor	ida 32835	Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Ζ <sub>1</sub> p	Country	Zip	Country	8. This corporation has liability for		i. 199.032,
:4	25 g. Name and Address of Currer		30	Florida Statutes  10. Name and Address of New Re	Yes No	
DA		it neglisteres Agent	81 Name	ROSSMAN, NANCY	77.	
	SSMAN, NANCY A. 19 GREENBRIAR PARKWAY			Ses Pro West Blvd Not Acceptate		
	LANDO, FL . FL 32819		82 Street Actu	Suite 330	ole)	
011	Dailed' i E i i E araia		83 Orlan			
			84 City	ndo, Florida 32835	De 7in	Code
			Gity		FL 85 Zip	Code
11, Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the above-named corpora	poration submits this statement for the p		ts registered
	to the provisions of Sections 607 050 registered agont, or both, in the State am familiar with, and accept the oblig	1000-	es, the above-named corp authorized by the corpora orida Statutes.  E. Registered Agent signature requi	poration submits this statement for the ption's board of directors. I hereby accepted when reinstating)		ts registered registered
SIGNATURE	Signature, typied or printed name of registered age OFFICERS AN	er and tille if applicable (NOTE	E. Registered Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	ourpose of changing in the appointment as DATE  DATE  DERS AND DIRECTOR	RS IN 12
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4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes I flurther certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Bl

SIGNATURE:

SIGNATURE AND WEED OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

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