

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L51865

FILED
May 16, 2009
Secretary of State

Entity Name: STAR HOSPITALITY MANAGEMENT, INC.

Current Principal Place of Business:

6025 TAYLOR RD #2
PUNTA GORDA, FL 33950

New Principal Place of Business:

26530 MALLARD WAY
PUNTA GORDA, FL 33950

Current Mailing Address:

6025 TAYLOR RD #2
PUNTA GORDA, FL 33950

New Mailing Address:

26530 MALLARD WAY
PUNTA GORDA, FL 33950

FEI Number: 65-0170167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAR HOSPITALITY MGMT
6025 TAYLOR RD #2
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

STAR HOSPITALITY MGMT
26530 MALLARD WAY
PUNTA GORDA, FL 33950 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:

05/16/2009

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: P () Delete
Name: DANKO, SHERIDAN H
Address: 3631 LAKEMONT DR
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP () Delete
Name: DANKO, BILL
Address: 3631 LAKEMONT DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DANKO, SHERIDAN H
Address: 3566 TRIPOLI BLVD.
City-St-Zip: PUNTA GORDA, FL 33950

Title: VP (X) Change () Addition
Name: DANKO, WILLIAM M
Address: 3566 TRIPOLI BLVD
City-St-Zip: PUNTA GORDA, FL 33950

I hereby certify that the information supplied with this filing does not qualify 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: H. SHERIDAN DANKO

PRES

05/16/2009

Electronic Signature of Signing Officer or Director

Date