FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE: >

101

1. Corporation		o (U)							
FIVE S	TAR VENTURES, INC.				A MARKAN ALE KINI BANG ANAL		1 51645 5464	. 61811 61614 1864	
Principal Place	of Business	Mailing Address				11261 1211 A1A11 A121	, \$1911 912 11	I BIBIT DIBIL IBBI	
P.O. DRAWE		% SCOTT WELLS CLE P.O. DRAWER 2298							
PANAMA CIT	1 FL 32402	PANAMA CITY FL 3240	02		 Date Incorporated or Qualifie 03/22/1990 	1 -	of Last Re	•	
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number			Applied For	
21	 	26			65-0185049			Not Applicable	a
Suite, Apl. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		•	Additional Required	
City & State		City & State			6. Election Campaign Financing			0 Мау Ве	
700	Counts	28	Count	~	Trust Fund Contribution			to Fees	\dashv
<i>Z</i> ip 24	Country 25	Zıp	Count	r y	8. This corporation has liability f	orintangibie tax ∕es ∏No	under s	199.032,	L
<u> </u>	g. Name and Address of Curren		1301		10. Name and Address of Nev		gent		1
			8	1 Name	LARRY V CARA	. 1 (
OVERM/	AN, JOHN C.		8	2 Street Ad	LARRY . K CARR dress (P.O. Box Number is Not Accep	DLL table)			
8623 N			25	SI JENKS AUE.				_	
PANAM/	A CITY FL 32408		8	3	•				
			ē	4 City	0.1		85 _Zig	Code	\dashv
				1 YA	wana city	<u> </u>	スプ	2125 S	
Pursuant to or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric	and 607.1508, Florida Statute da. Such change was authorize	s, the above of by the co	e-named corp rporation's bo	oration submits this state nent for the pard of directors. I hereby accept the a	purpose of chan ppointment as re	ging its re agistered	agistered offic agent. I am	ж
familiar with	h, and accept the obligations of, Secti	on 607,0505, Floats Statutes			•	• •	1 .2	و پر متو د	
SIGNATURE _	LARRY G. CARROLL	Say W	res	nd But	ired when reinstating)	DATE	40	576	-
12.	Signature, typed as printed name of registered agent OFFICERS AND		13.	gent signature requ	ADDITIONS/CHANGES TO C		DIRECTO	RS IN 12	
TOLE	D	DELETE	1, 1 TITL	.F	SEC/TREASURE		Change	Addition	$\exists \S$
NAME	WARRINER, DAVID P	438 NORTH COVE BLVD.		E	• • • • • • • • • • • • • • • • • • • •	-			7
STREET ADDRESS	438 NORTH COVE BLVD.			EET ADDRESS					
CITY-ST-ZIP	PANAMA CITY FL 32401			-ST-ZIP					[3
TITLE	D	ARRAR, KERRY		.E			Change	☐ Addition	۱,
NAME	FARRAR, KERRY			IE					
STREET ADDRESS	438 NORTH COVE BLVD.			EFF ADDRESS					
CITY-ST-ZIP	PANAMA CITY FL 32401	JIT FL 32401		-ST-ZIP	D. a. Isla . see		Change	☐ Addition	
TITLE	D D	_			President	W.	Change	LJ AUGIDON	
NAME STREET ADDRESS	CARROLL, LARRY K. 2601 JENKS AVE		32 NAM	EET ADDRESS	2551 Jenks Ave.				
CITY - ST - ZIP	PANAMA CITY FL			-SI-ZIP	ANAMA City, FIA.	32405			1
TITLE	D	☐ DELETE	4 1 111		Action on \$ 7 F to.		Change	☐ Addition	\dashv
NAME	OVERMAN, JOHN C.		4.2 NAM			_	•	_	
STREET ADDRESS	8623 N LAGOON DR D-5		i i	EET ADDRESS					
CITY-SI-ZIP	PANAMA CITY BEACH FL		4.4 CITY	-ST-ZIP					
TITLE	D	☐ DELETE		.E			Change	☐ Addition	
NAME	CLEMONS, SCOTT W.		5.2 NAM	IE					
ŞTREET ADDRESS	438 NORTH COVE BLVD.		5.3 STR	EET ADDRESS					
CITY-ST-ZIP	PANAMA CITY FL			- ST- 21P			LObres	Fred Address	_
THILE	☐ DELETE		6. 1 TIT				Change	Addition	
NAME			6.2 NAN						1
STREET ADDRESS				EET ADDRESS					
14 Ldo bereby	v certify that the information supplied y	with this filing is voluntarily furni		'-ST-ZIP oes not qualif	y for the exemption stated in Section 1	19.07(3)(k). Étori	da Statut	es. I further	\dashv
certify that	the information indicated on this annu-	ial report or supplemental annu	ual report is	true and acci	rate and that my signature shall have this report as required by Chapter 607	the same legal e	ffect as if	made under	