

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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Jan 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L60618 (0)

1. Corporation Name
FIVE STAR VENTURES, INC.

Principal Place of Business

% SCOTT WELLS CLEMONS
P.O. DRAWER 2298
PANAMA CITY FL 32402

Mailing Address

% SCOTT WELLS CLEMONS
P.O. DRAWER 2298
PANAMA CITY FL 32402-2298



3. Date Incorporated or Qualified 03/22/1990	3a. Date of Last Report 04/30/1996
4. FEI Number 65-0185049	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 Suite Apt # etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

CARROLL, LARRY K
2551 JENKS AVE
PANAMA CITY FL 32405

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Larry K. Carroll President LARRY K. CARROLL

1-14-97

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	WARRINER, DAVID P	
STREET ADDRESS	438 NORTH COVE BLVD.	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	P	DELETE
NAME	CARROLL, LARRY K.	
STREET ADDRESS	2551 JENKS AVE	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	D	DELETE
NAME	OVERMAN, JOHN C.	
STREET ADDRESS	8823 N LAGOON DR D-5	
CITY-ST-ZIP	PANAMA CITY BEACH FL	
TITLE	D	DELETE
NAME	CLEMONS, SCOTT W.	
STREET ADDRESS	438 NORTH COVE BLVD.	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DAVID WARRINER
1.3 STREET ADDRESS	200 Monument St.
1.4 CITY-ST-ZIP	Post St. Joe, FL 32456
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SCOTT CLEMONS
4.3 STREET ADDRESS	405 DAK AVE.
4.4 CITY-ST-ZIP	PANAMA CITY, FL. 32401
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby 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 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 Block 13 if changed, or as an attachment with an address

SIGNATURE:

Larry K. Carroll President LARRY K. CARROLL

DATE

1-14-97 (904) 872-8200

CR2E034 (9/96)