

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L91916

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: STAR MOTORS OF COLUMBIA, INC.

**Current Principal Place of Business:**

1780 E DUVAL STREET #101  
LAKE CITY, FL 32055

**New Principal Place of Business:**

129 NE WEBSTER AVE  
LAKE CITY, FL 32055

**Current Mailing Address:**

1780 E DUVAL STREET #101  
LAKE CITY, FL 32055

**New Mailing Address:**

PO BOX 2316  
LAKE CITY, FL 32056

FEI Number: 59-3042569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HALEY, WILLIAM J.  
10 N COLUMBIA STREET  
LAKE CITY, FL 32055 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: OOSTERHOUDT, F. S.,  
Address: 1780 E DUVAL STREET #101  
City-St-Zip: LAKE CITY, FL 32055

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: OOSTERHOUDT, F. S.,  
Address: 129 NE WEBSTER AVE  
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the 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: FS OOSTERHOUDT

DP

04/24/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date