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Jun 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M43871 (6)
 1. Corporation Name
LODESTAR NEW ORLEANS, INC.



Principal Place of Business 630 US HWY. ONE SUITE 403 N. PALM BEACH FL 33408 US	Mailing Address P.O. BOX 14485 NORTH PALM BEACH FL 33408-0485 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 218 U.S. HIGHWAY #1 Suite, Apt. #, etc. 22 300 City & State 23 TEQUESTA, FLORIDA Zip 24 33469 Country 25 U.S.A.	2a. Mailing Address 26 218 U.S. HIGHWAY #1 Suite, Apt. #, etc. 27 300 City & State 28 TEQUESTA, FLORIDA Zip 29 33469 Country 30 U.S.A.	3. Date Incorporated or Qualified 12/24/1986 4. FEI Number 59-2752437 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No
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9. Name and Address of Current Registered Agent

GIBBS, RONALD L.
18870 PAINTED LEAF CT
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83 City	84 State	85 Zip Code
	3000 N. W. 1615	TEQUESTA	FL	33469

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

Signature typed or printed name of individual to be used if applicable

(Not Required) Signature of Agent required when reinstating

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	1.1 TITLE	D/S
NAME	BYRNE, THOMAS F.	1.2 NAME	BYRNE, THOMAS F.
STREET ADDRESS	8 KING STREET, EAST	1.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300
CITY-ST-ZIP	TORONTO, CAN	1.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.
TITLE	DV	2.1 TITLE	D/V
NAME	DICKIE, PAUL	2.2 NAME	DICKIE, PAUL A.
STREET ADDRESS	514 CHARTWELL ROAD	2.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300
CITY-ST-ZIP	ONTARIO, CANADA	2.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.
TITLE	DP	3.1 TITLE	D/P
NAME	GIBBS, RONALD L.	3.2 NAME	GIBBS, RONALD L.
STREET ADDRESS	18870 PAINTED LEAF	3.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300
CITY-ST-ZIP	JUPITER FL	3.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.
TITLE	DCE	4.1 TITLE	D
NAME	WILSON, JIM	4.2 NAME	WILSON, G. JAMES
STREET ADDRESS	14440 CHERRY LANE CT	4.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300
CITY-ST-ZIP	LAUREL MD	4.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.
TITLE	AS	5.1 TITLE	T
NAME	SALIE, DONALD	5.2 NAME	McGEE, NANCY E.
STREET ADDRESS	630 U.S. HWY ONE	5.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300
CITY-ST-ZIP	N. PALM BEACH FL 33408	5.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.
TITLE	VD	6.1 TITLE	D/V
NAME	PATTON, GEORGE	6.2 NAME	PATTON, GEORGE E.
STREET ADDRESS	514 CHARTWELL RD	6.3 STREET ADDRESS	218 U.S. HIGHWAY #1, SUITE 300
CITY-ST-ZIP	ONTARIO, CANADA	6.4 CITY-ST-ZIP	TEQUESTA, FLORIDA 33469 U.S.A.

14. I 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 on an attachment with an address.

SIGNATURE

May 29, 1998

416/364-1616

CP2E034 (10/97)