

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001379

FILED  
May 02, 2006  
Secretary of State

**Entity Name:** STARLIGHTS PERFORMANCE ARTS, INC.

**Current Principal Place of Business:**

2342 13TH STREET SOUTH  
ST PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

2342 13TH STREET SOUTH  
ST PETERSBURG, FL 33705

**New Mailing Address:**

**FEI Number:** 59-3637329      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

GREEN-FOSTER, DELORES  
2342 13TH STREET SOUTH  
ST PETERSBURG, FL 33705      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: GREEN-FOSTER, DELORES  
Address: 2342 13TH STREET SOUTH  
City-St-Zip: ST PETERSBURG, FL 33705

Title: D      ( ) Delete  
Name: PRESLEY, EARL  
Address: 3759 29TH AVE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33711

Title: D      ( ) Delete  
Name: HAWTHORNE, ANTHONY  
Address: 3540 52ND ST N  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D      ( ) Delete  
Name: MANN, MICHELLE F  
Address: 3700 8TH ST SOUTH  
City-St-Zip: ST PETERSBURG, FL 33705

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DELORES GREEN - FOSTER

P

05/02/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date