2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 07, 2005
Secretary of State

DOCUMENT# N02000002435

Entity Name: OSCEOLA SHOOTING STARS INC.

Current Principal Place of Business:

2624 MARTINA AVE
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

2624 MARTINA AVE
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 03-0411716 **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:

MONTGOMERY, PATRICIA F
2624 MARTINA AVE
KISSIMMEE, FL 34741 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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	THOMAS, BARRY	
Address:	2914 FLORIDA AVE.	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	T	( ) Delete
Name:	MONTGOMERY, FULTON D	
Address:	2624 MARTINA AVE	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	V	( ) Delete
Name:	DARBOUZE, KAMIL	
Address:	1314 SWEETWOOD BLVD.	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	S	( ) Delete
Name:	MONTGOMERY, PATRICIA F	
Address:	2624 MARTINA AVE.	
City-St-Zip:	KISSIMMEE, FL 34741	
Title:	FUND	( ) Delete
Name:	CHAPPELL, ALOUSA	
Address:	2914 FLORIDA AVE	
City-St-Zip:	KISSIMMEE, FL 34744	
Title:	DIR	( ) Delete
Name:	ROBERTS, GRACE	
Address:	411DOLPHIN STREET	
City-St-Zip:	KISSIMMEE, FL 34744	

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:	
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 Section 119.07(3)(i), 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: FULTON D. MONTGOMERY T 09/07/2005

Electronic Signature of Signing Officer or Director — Date