

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002435

FILED  
Apr 25, 2003  
Secretary of State

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 ( )

## Name and Address of Current Registered Agent:

MONTGOMERY, PATRICIA F  
2624 MARTINA AVE  
KISSIMMEE, FL 34741

## 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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: FUND ( ) Change (X) Addition  
Name: CHAPPELL, ALOUSA  
Address: 2914 FLORIDA AVE  
City-St-Zip: KISSIMMEE, FL 34744

Title: DIR ( ) Change (X) Addition  
Name: ROBERTS, GRACE  
Address: 411 DOLPHIN STREET  
City-St-Zip: KISSIMMEE, FL 34744

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: PATRICIA MONTGOMERY

S

04/25/2003

Electronic Signature of Signing Officer or Director

Date