## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000733

Entity Name: AMERICA'S ALL STARS, INC.

FILED May 31, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2835 CHAPELWOOD CT.

OVIEDO, FL 32765

4605 RIVERTON DRIVE
ORLANDO, FL 32817

Current Mailing Address: New Mailing Address:

2835 CHAPELWOOD CT. 4605 RIVERTON DRIVE OVIEDO, FL 32765 ORLANDO, FL 32817

FEI Number: 02-0667202 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:

ROQUEMORE, BRIAN G
2835 CHAPELWOOD CT.
OVIEDO, FL 32765 US
ROQUEMORE, BRIAN G
4605 RIVERTON DRIVE
ORLANDO, FL 32817 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: 05/31/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O/D ( ) Delete Title: O/D (X) Change ( ) Addition Name: ROQUEMORE, BRIAN G Name: ROQUEMORE, BRIAN G

Address: 2835 CHAPELWOOD CT. Address: 4605 RIVERTON DRIVE
City-St-Zip: OVIEDO, FL 32765 City-St-Zip: ORLANDO, FL 32817

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ROSE, WIL DR
 Name:

 Address:
 6555 DEARBORN DR.
 Address:

 City-St-Zip:
 FALLS CHURCH, VA 22040
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 TURNER, JEFF
 Name:

 Address:
 1590 WOODLAND AVE.
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN G. ROQUEMORE PRES 05/31/2007