


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 23, 2005 8:00 am**  
**Secretary of State**

03-23-2005 90046 013 \*\*\*\*61.25

<b>DOCUMENT # N03000001304</b>	
1. Entity Name <b>STARBOARD MINISTRIES, INC.</b>	

Principal Place of Business <b>1053 NE 15TH PL. GAINESVILLE FL 32601</b>	Mailing Address <b>PO BOX 523 GAINESVILLE FL 32602</b>
---	---

2. Principal Place of Business	3. Mailing Address <b>P.O. Box 523</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>Denville Fla</b>	City & State <b>Denville Fla</b>
Zip <b>32602</b>	Country <b>Alaska</b>



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent <b>YOUNG, GEORGE F 1053 NW 15TH PL. GAINESVILLE FL 32601</b>	
7. Name and Address of New Registered Agent Name: <b>George F. Young</b> Street Address (P.O. Box Number is Not Acceptable): <b>1008 N.W. 5th Ave</b> City: <b>Gainesville</b> State: <b>FL</b> Zip Code: <b>32601</b>	

8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE <b>George F. Young (President)</b>	<b>George F. Young</b>	DATE <b>3-16-05</b>

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
--	--	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>F YOUNG, GEORGE F 1053 NW 15TH PL. GAINESVILLE FL 32601</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V YOUNG, BERTHA 1225 SE 13TH ST. GAINESVILLE FL 32641</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>RA SCOTT, MICHAEL R 4021 NW 7TH ST. GAINESVILLE FL 32601</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <b>George F. Young</b> <b>George F. Young</b>	DATE: <b>3-16-05</b> (352) 377-1674