

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001443

FILED
Jan 19, 2009
Secretary of State

Entity Name: STARVIEW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

NABB ROAD / NABB LOOP
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

197 NABB ROAD
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 65-1221750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUPPUSWAMY, SATHYAN
197 NABB ROAD
TALLAHASSEE, FL 32317 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: S () Delete
Name: MCLAUGHLIN, ELVIN
Address: 207 NABB LOOP
City-St-Zip: TALLAHASSEE, FL 32317

Title: P () Delete
Name: ZACCARDI, THOMAS
Address: 211 NABB LOOP
City-St-Zip: TALLAHASSEE, FL 32317

Title: T () Delete
Name: KUPPUSWAMY, SATHYAN
Address: 197 NABB ROAD
City-St-Zip: TALLAHASSEE, FL 32317

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:

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: SATHYAN KUPPUSWAMY

T

01/19/2009

Electronic Signature of Signing Officer or Director

Date