

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003594

FILED  
Apr 17, 2007  
Secretary of State

Entity Name: STARS/STRIVE OF PINELLAS COUNTY, INC.

## Current Principal Place of Business:

300 31ST STREET NORTH  
EAST BUILDING, SUITE #100  
ST. PETERSBURG, FL 33713

## New Principal Place of Business:

## Current Mailing Address:

300 31ST STREET NORTH  
EAST BUILDING, SUITE #100  
ST. PETERSBURG, FL 33713

## New Mailing Address:

FEI Number: 75-3160171

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LAWSON, CAROL  
300 31ST STREET NORTH  
EAST BUILDING, SUITE #100  
ST. PETERSBURG, FL 33713 US

## Name and Address of New Registered Agent:

SIMPKINS, KIMBERLY  
300 31ST STREET NORTH  
EAST BUILDING, SUITE #100  
ST. PETERSBURG, FL 33713 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: KIMBERLY SIMPKINS

04/17/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HILL, LUDELL  
Address: 333 31 STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D ( ) Delete  
Name: VALENTI, DEBORAH  
Address: 4250 66TH STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 33709

Title: D ( ) Delete  
Name: PERRY, EDWARD  
Address: 11457 ULMERTON ROAD  
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete  
Name: DRAYTON, NATHANIEL  
Address: 2867 62ND AVE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: GODFREY, DEBORAH A  
Address: 300 31ST STREET NORTH, STE 100  
City-St-Zip: SAINT PETERSBURG, FL 33713

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH A. GODFREY

EX D

04/17/2007

Electronic Signature of Signing Officer or Director

Date