

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006357

FILED  
Feb 10, 2008  
Secretary of State

Entity Name: STARVIEW TERRACE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

60 SAGRIS COVE  
MIRAMAR BEACH, FL 32550 38

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2503  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

60 SAGRIS COVE  
MIRAMAR BEACH, FL 325503842

FEI Number: 20-4277140

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KILPATRICK, WILLIAM G. JR. ESQ  
35008 EMERALD COAST PARKWAY, STE. 202  
DESTIN, FL 32541 US

**Name and Address of New Registered Agent:**

KILPATRICK, WILLIAM G. JR. ESQ  
2000 98 PALMS BLVD.  
STE. 110  
DESTIN, FL 32541 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:

02/10/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DISMUKES, JAMES A.  
Address: 9593 BRENTWOOD  
City-St-Zip: NAVARRE, FL 32566

Title: D ( ) Delete  
Name: FRANKFURTER, GEORGE M  
Address: 60 SAGRIS COVE  
City-St-Zip: MIRAMAR, FL 32550

Title: D ( ) Delete  
Name: FRANKFURTER, ZAFRIRA  
Address: 60 SAGRIS COVE  
City-St-Zip: MIRAMAR, FL 32550

**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: GEORGE M. FRANKFURTER

D

02/10/2008

Electronic Signature of Signing Officer or Director

Date