2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009107

City-St-Zip:

Entity Name: LEHIGH ACRES STARS INC.

FILED Jul 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 25 HOMESTEAD RD UNITS 3 & 4 LEHIGH ACRES, FL 33936 **New Mailing Address: Current Mailing Address:** 25 HOMESTEAD RD UNITS 3 & 4 LEHIGH ACRES, FL 33936 FEI Number: 87-0765450 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: PATTY'S DANCE STUDIO INC. 25 HOMESTEAD RD LEHIGH ACRES, FL 33936 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BANTILLO, CYNTHIA Name: Name: Address: 15901 OLD OLGA RD Address: City-St-Zip: ALVA, FL 33920 City-St-Zip: Title: Title: () Delete () Change () Addition MCDOWELL, ADRIENNE Name: Name: Address: 804 JEFFERSON AVE Address: City-St-Zip: LEHIGH ACRES, FL 33972 City-St-Zip: Title: () Delete Title: (X) Change () Addition RODEN, KATHLEEN Name: GLASSER, JENNIFER Name: 125 OAKSIDE ST Address: Address: 342 COLUMBUS BLVD City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936 Title: SEC () Delete Title: SEC (X) Change () Addition Name: ELLIOT, BARBIE Name: ELLIOTT, BARBIE 6371 BUCKINGHAM RD Address: Address: 13333 1ST ST FT MYERS, FL 33905 FT MYERS, FL 33905

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.

City-St-Zip:

SIGNATURE: BARBARA L ELLIOTT S 07/02/2007