

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003070

FILED
Jul 04, 2008
Secretary of State

Entity Name: STAR CENTER, INC.

Current Principal Place of Business:

1676 WEST HIBISCUS BLVD
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

1676 WEST HIBISCUS BLVD
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 20-4603093 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:

O'BRIEN, JAMES M ESQ.
O'BRIEN RIEMENSCHNEIDER WATTWOOD & CANTWEL
1686 WEST HIBISCUS BOULEVARD
MELBOURNE, FL 32901 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:

Title: CEOP () Delete
Name: DECARO, FRANK P DR.
Address: 549 SWEET WATER CT.
City-St-Zip: MELBOURNE, FL 329411927

Title: T () Delete
Name: DECARO, NICOLE E DR.
Address: 549 SWEET WATER CT.
City-St-Zip: MELBOURNE, FL 329411927

Title: S () Delete
Name: DECARO, FRANK P III
Address: 549 SWEET WATER CT.
City-St-Zip: MELBOURNE, FL 329411927

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: M () Change (X) Addition
Name: KITOKO, JOHN DR
Address: 300 PATT STREET
City-St-Zip: APEX, NC 27502

Title: M () Change (X) Addition
Name: WHITNEY, CAROL DR
Address: 200 GLASTONBURY BLVD SUITE 102
City-St-Zip: GLASTONBURY, CT 06033

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: DR. FRANK P. DECARO

CEO

07/04/2008

Electronic Signature of Signing Officer or Director

Date