

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000005642

FILED  
Dec 22, 2008  
Secretary of State

Entity Name: STARR CENTER INC.

## Current Principal Place of Business:

6504 BRIDGE WATER WAY #906  
PANAMA CITY BEACH, FL 32407

## New Principal Place of Business:

115 N ORANGE ST.,  
PANAMA CITY BEACH, FL 32413

## Current Mailing Address:

6504 BRIDGE WATER WAY #906  
PANAMA CITY BEACH, FL 32407

## New Mailing Address:

115 N ORANGE ST.,  
PANAMA CITY BEACH, FL 32413

FEI Number: 20-8796038      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

SAMUELS, KATHRYN  
115 N ORANGE ST  
PANAMA CITY BEACH, FL 32413      US

## Name and Address of New Registered Agent:

SAMUELS, KATHRYN R PRESIDE  
115 N ORANGE ST  
PANAMA CITY BEACH, FL 32413      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: KATHRYN SAMUELS

12/22/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: SAMUELS, KATHRYN  
Address: 115 N. ORANGE STREET  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: S      ( ) Delete  
Name: LEE, CLEO  
Address: 402 MISSOURI AVENUE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: T      ( ) Delete  
Name: LOGAN, REBECCA  
Address: 1420 CAROLINA  
City-St-Zip: LYNN HAVEN, FL 32444

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES      (X) Change ( ) Addition  
Name: SAMUELS, KATHRYN  
Address: 115 N. ORANGE STREET  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: SEC      (X) Change ( ) Addition  
Name: DURHAM, CAROL  
Address: 1819 MASSACHUSETTS  
City-St-Zip: LYNN HAVEN, FL 32444

Title: TREA      (X) Change ( ) Addition  
Name: TUCKER, BARBARA  
Address: 2101 W HWY 390  
City-St-Zip: LYNN HAVEN, FL 32444

Title: VP      ( ) Change (X) Addition  
Name: DEAN, CHARLOTTE  
Address: 1103 MICHIGAN AVE  
City-St-Zip: LYNN HAVEN, FL 32444

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: CAROL DURHAM

SEC

12/22/2008

Electronic Signature of Signing Officer or Director

Date