

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41029

FILED
Mar 24, 2008
Secretary of State

Entity Name: STARLIGHT PROMENADERS, INC.

Current Principal Place of Business:

P.O. BOX 34
DEBARY, FL 32713

New Principal Place of Business:

38 S SHELL RD
DEBARY, FL 32713

Current Mailing Address:

P.O. BOX 34
DEBARY, FL 32713

New Mailing Address:

FEI Number: 59-2998342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'CONNOR, TOM
34 MAPLEHURST AVE.
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

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: PD () Delete
Name: DUNAGAN, JERRY
Address: 2470 REED ELLIS RD
City-St-Zip: OSTEEN, FL 32764

Title: SD () Delete
Name: SANTORO, JO
Address: 160 LIVE OAKWOOD CT
City-St-Zip: DELTONA, FL 32725

Title: VD () Delete
Name: LYSOBEY, JEANNIE
Address: 1013 BELVEDERE DR
City-St-Zip: DELTONA, FL 32725

Title: TD () Delete
Name: O'CONNOR, TOM
Address: 34 MAPLEHURST AVE.
City-St-Zip: DEBARY, FL 32713

Title: T (X) Delete
Name: BARR, BOB
Address: 1567 FAYETTEVILLE AVE.
City-St-Zip: DELTONA, FL 32725

Title: T (X) Delete
Name: GARRETT, DAVID
Address: 220 W. GARDENIA
City-St-Zip: ORANGE CITY, FL 32763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: POOLE, RANDALL
Address: 1541 LAKESIDE DR
City-St-Zip: DELAND, FL 32720

Title: SD (X) Change () Addition
Name: HENDRICKS, DONNA
Address: 5150 MT PLYMOUTH RD
City-St-Zip: APOPKA, FL 32738

Title: VD (X) Change () Addition
Name: BOAK, GALE
Address: 55 MADERA
City-St-Zip: DEBARY, FL 32713

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: RANDALL POOLE

PRES

03/24/2008

Electronic Signature of Signing Officer or Director

Date