SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

N94000003259 OCUMENT

Corporation Name

STAR CENTER, INC.

Principal Place of Business

incipal Place of Business
26360 OLD TRILBY ROAD
RECORSVILLE EL 34602

Suite, Apt. #, etc.

RAAB, ROBERT

GNATURE

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26260 OLD TRILBY ROAD **BROOKSVILLE FL 34602**

. Pursuant to the provisions of Section office or registered agent, or both, agent. I am familiar with, and acce

Signature, typed or printed name of

City & State

Zip

JS

FILED Sep 09, 1999 8:00 am **§** Secretary of State

09-09-1999 90004 007 ****61.25

ENTER, INC.				* 6 613869 - 900	J4 - ,		
of Business LBY ROAD FL 34602	Mailing Address 26380 OLD TRILBY ROAD BROOKSVILLE FL 34802 US	:					
ce of Business	F-1	· ·		3. Date Incorporated or Qualifed			
, etc.	Suite, Apt. #, etc.	1		4. FEI Number 59-3314852	 	plied For t Applicable	
	City & State		,	5. Certificate of Status Desired	\$8.75 A	1	
Country 25	Zip	Countr	у	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	- ,	
9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registere	d Agent		
•		81	1 Name				
Bert Ditrilby Road Ille Fl 34602				Iress (P.O. Box Number is Not Acceptable)			
			3				
		84	1	F		l	
familiar with, and accept the obligation	tions of, Section 617.0503, Flori	da Statute	5 .	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	ointment as reg	jistered	
gnature, typed or printed name of registered ager	D DIRECTORS	13.	siit agriatura requii	ADDITIONS/CHANGES TO OFFICERS			
DTV	☐ DELETE	1.1 TITLE			Change	☐ Addition	(00/4/
RAAB, DEBORAH		1.2 NAME					ŗ
26360 OLD TRILBY ROAD	· ·		ET ADDRESS				ò
BROOKSVILLE FL 34602			ST-ZIP				Ď
Ρ .	☐ DELETE 2.1 TIT				☐ Change	☐ Addition	C
RAAB, ROBERT	. 22N						
		2.3 STREE	ET ADDRESS			ļ	
BROOKSVILLE FL 34602		2. 4 CITY-	ST-ZIP		Change	☐ Addition	
D	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition	
LUPINSKI, JOHN		3.2 NAME					
1520 IVYDALE RD.			ET ADDRESS				
SPRING HILL FL 34606	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE			☐ Change	Addition	
WIEDMER, TERRY		4. 2 NAME			_ •	_	
3527 DOW LANE			T ADDRESS				
SPRING HILL FL 34609		4.4 CITY-S					
D	DELETE 5.1 T				Change	Addition	
DOFKA, RICHARD							
•		5.3 STREE	ET ADDRÉSS				
SPRING HILL FL 34609		5.4 CITY-5	ST-ZIP	_			
	□ DELETE 6.1 II				☐ Change	Addition	

6.4 CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee ampowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.2 NAME 6.3 STREET ADDRESS

IGNATURE:

包EQUIRED

9-6-99 352 796-1918

Daytima Phone #