

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000042251

FILED
Jan 06, 2009
Secretary of State

Entity Name: NORTHSTAR CAPITAL MANAGEMENT, INC.

Current Principal Place of Business:

3801 PGA BOULEVARD
SUITE 904, ATTN: KAREN REEVES
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

3801 PGA BOULEVARD
SUITE 904, ATTN: KAREN REEVES
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 65-1002630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCPHARLIN, JASON J
3801 PGA BLVD STE 904
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MERGLER, H. KENT
Address: 6306 SE OAKMONT PLACE
City-St-Zip: STUART, FL 34997

Title: PD () Delete
Name: MERGLER, STEPHEN
Address: 955 ALLAMANDA DRIVE
City-St-Zip: DELRAY BEACH, FL 33483

Title: VD () Delete
Name: VAN BEUREN, PETER
Address: 17036 TRAVERSE CIRCLE
City-St-Zip: JUPITER, FL 33477

Title: VTD () Delete
Name: MCPHARLIN, JASON
Address: 108 ANDALUSIA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: () 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON MCPHARLIN

VTD

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date