## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000086389

1. Entity Name

NORTHSTAR FAMILY ENTERPRISES, INC.



FILED Jan 22, 2007 08:00 AM Secretary of State

Principal Place of Business

25191 US HWY 19 N CLEARWATER, FL 33763 Mailing Address

25191 US HWY 19 N CLEARWATER, FL 33763



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01192007	No Chg-P	CR2E034 (11/05)	

32-2303201	ed 🗆	\$8.75 Additional		
52-2383201			Not Applicable	

6. Name and Address of Current Registered Agent

RIEF, FRANK J III 442 W KENNEDY BLVD STE 340 TAMPA, FL 33606

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE.							
	Signature, typed or printed name of registered agent and title i	applicable (NOTE Registered	Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIMMITT, RICHARD R 25191 US HWY 19 N CLEARWATER, FL 33763						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000595611 01/23/07-80044-025 150.00		
TITLE MAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY- ST-ZIP				IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY - ST - ZIP							
TITLE NAME STREET ADDRESS CITY-SI-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other likelempowered.							