

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087073

Entity Name: TRI-STAR ADVISORS, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

20 S BROAD STREET
BROOKSVILLE, FL 34601

New Principal Place of Business:

6632 TRAIL BLVD.
NAPLES, FL 34108

Current Mailing Address:

20 S BROAD STREET
BROOKSVILLE, FL 34601

New Mailing Address:

P.O. BOX 770277
NAPLES, FL 34107

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA & OFFSHORE BUSINESS FORMATION, INC
20 S BROAD STREET
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

HANNAH, DOUGLAS
6632 TRAIL BLVD.
NAPLES, FL 34108 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: DOUGLAS HANNAH

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HANNAH, DOUGLAS
Address: 6632 TRAIL BLVD
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: HANNAH, DOUGLAS
Address: 6632 TRAIL BLVD
City-St-Zip: NAPLES, FL 34108

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOUGLAS HANNAH

PRES

04/25/2005

Electronic Signature of Signing Officer or Director

Date