

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P05000009902

**FILED**  
**Jul 20, 2006**  
**Secretary of State****Entity Name:** NORTHSTAR MANAGEMENT AND INVESTMENTS, INC**Current Principal Place of Business:**6840 WOMENS CLUB DR  
KEYSTONE HEIGHTS, FL 32656**New Principal Place of Business:****Current Mailing Address:**540 DOVE ST  
KEYSTONE HEIGHTS, FL 32656**New Mailing Address:****FEI Number:** 20-2192912**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DYKES, DEREK S  
540 DOVE ST  
KEYSTONE HEIGHTS, FL 32656 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: P ( ) Delete  
Name: DYKES, DEREK S  
Address: 540 DOVE ST  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: VP ( ) Delete  
Name: DYKES, STEVEN S  
Address: 6840 WOMANS CLUB DR  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: VP ( ) Delete  
Name: WORLEY CONSTRUCTION, AND ASSOCIATES, INC  
Address: 110 GORDON CHAPELL RD  
City-St-Zip: HAWTHRONE, FL 32640

Title: T (X) Delete  
Name: DYKES, PAGEANNA C  
Address: 540 DOVE ST  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: SEC ( ) Delete  
Name: DYKES, DUSTIN M  
Address: 6842 WOMANS CLUB DR  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: DYKES, PAGE ANNA S  
Address: 540 DOVE ST  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

Title: T (X) Change ( ) Addition  
Name: WORLEY CONSTRUCTION, AND ASSOCIATES, INC  
Address: 110 GORDON CHAPELL RD  
City-St-Zip: HAWTHRONE, FL 32640

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 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: DEREK DYKES

P

07/20/2006

Electronic Signature of Signing Officer or Director

Date