

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000155629

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: JOYSTAR COMMUNICATIONS NETWORK, INC.

## Current Principal Place of Business:

5235 JONES AVENUE  
ZELLWOOD, FL 32798

## New Principal Place of Business:

508 PINE HILL STREET  
EUSTIS, FL 32726

## Current Mailing Address:

PO BOX 1287  
ZELLWOOD, FL 32798

## New Mailing Address:

FEI Number: 20-8088138      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STUTZMAN, LARRY R  
5235 JONES AVENUE  
ZELLWOOD, FL 32798      US

## Name and Address of New Registered Agent:

BRIAN, MITCHELL F  
508 PINE HILL STREET  
EUSTIS, FL 32726      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: BRIAN F. MITCHELL

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: STUTZMAN, LARRY R  
Address: 5235 JONES AVENUE  
City-St-Zip: ZELLWOOD, FL 32798

Title: VP ( ) Delete  
Name: STUTZMAN, LARRY R  
Address: 5235 JONES AVENUE  
City-St-Zip: ZELLWOOD, FL 32798

Title: T ( ) Delete  
Name: STUTZMAN, SANDRA L  
Address: 5235 JONES AVENUE  
City-St-Zip: ZELLWOOD, FL 32798

Title: S ( ) Delete  
Name: STUTZMAN, SANDRA  
Address: 5235 JONES AVENUE  
City-St-Zip: ZELLWOOD, FL 32798

## 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: LARRY STUTZMAN

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date