

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000059365

Entity Name: FOUR STAR FARMS, INC.

FILED  
Feb 06, 2008  
Secretary of State

## Current Principal Place of Business:

898 PINE RIDGE LANE  
SARASOTA, FL 34240 US

## New Principal Place of Business:

14510 MJ ROAD  
MYAKKA CITY, FL 34251 US

## Current Mailing Address:

898 PINE RIDGE LANE  
SARASOTA, FL 34240 US

## New Mailing Address:

14510 MJ ROAD  
MYAKKA CITY, FL 34251 US

FEI Number: 26-0186832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VICARS, JAMESON A  
898 PINE RIDGE LANE  
SARASOTA, FL 34240 US

## Name and Address of New Registered Agent:

VICARS, JAMESON A  
14510 MJ ROAD  
MYAKKA CITY, FL 34251 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:

02/06/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: VICARS, JAMESON A  
Address: 898 PINE RIDGE LANE  
City-St-Zip: SARASOTA, FL 34240

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: VICARS, JAMESON A  
Address: 14510 MJ ROAD  
City-St-Zip: MYAKKA CITY, FL 34251

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: JAMESON VICARS

PRES

02/06/2008

Electronic Signature of Signing Officer or Director

Date