

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000071101

FILED  
Sep 11, 2009  
Secretary of State

**Entity Name:** STARLIGHT MEDICAL CONSULTANTS, INC.

**Current Principal Place of Business:**

487 PINELLAS BAY WAY S #206  
TIERRA VERDE, FL 33715

**New Principal Place of Business:**

**Current Mailing Address:**

7000 BEACH PLAZA SUITE 701  
ST PETE BEACH, FL 33706

**New Mailing Address:**

487 PINELLAS BAY WAY S #206  
TIERRA VERDE, FL 33715

**FEI Number:** 26-1705627

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEPINE, GUY  
487 PINELLAS BAY WAY #206  
TIERRA VERDE, FL 33715 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: STEWART, JOANN D  
Address: 487 PINELLAS BAY WAY S  
City-St-Zip: TIERRA VERDE, FL 33715

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

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:** JOANN D. STEWART

VP

09/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date