

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000033122

**FILED**  
**Feb 06, 2012**  
**Secretary of State**

**Entity Name:** FLYING STARS NOVELS, INC.

**Current Principal Place of Business:**

2897 SE OCEAN BLVD  
STUART, FL 34996

**New Principal Place of Business:**

5041 S.W. BLUE SKY LANE  
PALM CITY, FL 34990 US

**Current Mailing Address:**

2897 SE OCEAN BLVD  
STUART, FL 34996

**New Mailing Address:**

5041 S.W. BLUE SKY LANE  
PALM CITY, FL 34990 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ANDERSON, JR., WILLIAM D  
2897 SE OCEAN BLVD  
STUART, FL 34996 US

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

RHODES, SALLY  
5041 S.W. BLUE SKY LANE  
PALM CITY, FL 34990 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: SALLY RHODES

02/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RHODES, SALLY  
Address: 5041 S.W. BLUE SKY LANE  
City-St-Zip: PALM CITY, FL 34990 US

Title: VP  
Name: RHODES, BLAINE  
Address: 5041 S.W. BLUE SKY LANE  
City-St-Zip: PALM CITY, FL 34990 US

Title: S  
Name: SCHRAWDER, LAURENCE T  
Address: 11532 GUM POINT RD.,  
City-St-Zip: BERLIN, MD 21811 US

I hereby 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 all other like empowered.

SIGNATURE: SALLY RHODES

P

02/06/2012

Electronic Signature of Signing Officer or Director

Date