2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P93000078300**

| DOCUMENT # P93000078300 1. Entity Name STAR ISLAND MANAGEMENT CORP. | | | | | Feb 16, 2000 8:00 am Secretary of State 02-16-2000 90016 011 ***150.00 | | |
|--|---|---|--|-----------------------------|--|---|--|
| Principal Plac | e of Business | Mailing Address | | | | | |
| N. POINCIANA BLVD. | | P. O. BOX 422168 KISSIMMEE FL 34742-2168 US | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | |
| City & State | | City & State | | 4, | FEI Number 59-3306571 Applied For Not Applicable | | |
| Zip | Country | Zip | Country | 5. | Certificate of Status Desired | | |
| | 6. Name and Address of Current Re | gistered Agent | | 7. | Name and Address of New Registered Agent | ĺ | |
| | | | Name | Moud | ers. Served M. | ĺ | |
| MEYERS, PA, STEVEN M ONE BISCAYNE TOWER, SUITE 3550 TWO SOUTH BISCAYNE BOULEVARD MIAMI FL 33131 | | | Street Address (P.O. Box Number is Not Acceptable) Exellitive Offices 2749 Poinciana Blvd. | | | | |
| 8. The above | named entity submits this statement for the | ne purpose of changing its re | egistered office or | 内 [SS] r registered ag | immee FL Zip Code 7746 gent, or both, in the State of Florida. | | |
| SIGNATURE . | Signature, typed or printed paths of registered agent and | Me if applicable. (NOTE. I | Registered Agent signat | ure required when r | /- / 4- 2000 Peinstating) DATE | | |
| Tax filing r | pration is eligible to satisfy its Intangible equirement and elects to do so. | FILE NOW!!! After MAY 1, 200 | · | 550.00 | 10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. | | |
| 11. | ** WALL MOTHER AND DI | RECTORS | 12. | | DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE | PDT SACRESON | ☐ Delete | TITLE | P/S/ | 110:1 | | |
| NAME | MEYERS, NEIL DR | | NAME STREET ADDRESS | 5001 | Lake Cecil Drive | | |
| STREET ADDRESS CITY-ST-ZIP | 5001 LAKE CECIL DRIVE KISSIMMEE FL | | CITY-ST-ZIP | Kiss | simmee, FL 34746 | | |
| TITLE | I VD | ☐ Delete | TITLE | 1 . 1 / 2 | O I D | Ì | |
| NAME | KAPLUS, ROBERT | Delete | NAME | 1 | is Only on 4 A. | l | |
| STREET ADDRESS | 3235 TOMAHAWK DR. | | STREET ADDRESS | 1 2025 | The Act House In St. | l | |
| CITY-ST-ZIP | KISSIMMEE FL | | CITY-ST-ZIP | Ki | Ssimmee, FL | ĺ | |
| TITLE | SDCB | ☐ Delete | TITLE | D. | ☐ Change ☐ Addition | | |
| NAME | MEYERS, HILLEL | | NAME | MIRY | ers, Hillel Spinetrue Drive | | |
| STREET ADDRESS | 4875 PINETREE DRIVE | | STREET ADDRESS | 487 | S PINO KEE IS IVE | | |
| CITY-ST-ZIP | MIAMI FL | | CITY-ST-ZIP | mi | ami Beh, FL | ĺ | |
| TITLE | DVP . Meyers, Jared | □ Delete | TITLE | DVP | ers Jared Blvd. | | |
| name Street address | 123 CELEBRATION BLVD | | NAME STREET ADDRESS | 274) | N. Poinciena Blvd. | | |
| CITY-ST-ZIP | CELEBRATION FL 34747 | | CITY-ST-ZIP | Kic | simmer FL 34746 | l | |
| TITLE | | ☐ Delete | TITLE | | | | |
| NAME | | T Delete | NAME | Infe | nte Korlney | | |
| STREET ADDRESS | | | STREET ADDRESS | 2794 | N. Poinciena Blvd. | | |
| CITY_CT_7ID | | | CITY_ST_7IP | ロニコンニ | 1 2 174/a | | |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Delete

Addition

☐ Change

FILED