

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P95000052693 (5)

1. Corporation Name
TRI STAR PROPERTIES, INC.



Principal Place of Business 14987 RIVER'S EDGE COURT, #138 FT. MYERS FL 33908		Mailing Address 14987 RIVER'S EDGE COURT, #138 FT. MYERS FL 33908	
2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 07/10/1995	
22 City & State	27 City & State	3a. Date of Last Report	
23 Zip	28 Country	4. FEI Number 65-0593426	
24	25	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent HANNAH, DOUGLAS J 14987 RIVER'S EDGE COURT, #138 FT. MYERS FL 33908		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			

SIGNATURE

Signature, typed or printed name of registered agent, a director, or agent.

Signature, typed or printed name of registered agent, a director, or agent.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D HANNAH, DOUGLAS J	1. TITLE	☐ Change ☐ Addition
NAME	14987 RIVER'S EDGE COURT, #138	2. NAME	
STREET ADDRESS	FT. MYERS FL 33908	3. STREET ADDRESS	
CITY-ST-ZIP		4. CITY-ST-ZIP	
TITLE	☐ DELETE	5. TITLE	☐ Change ☐ Addition
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY-ST-ZIP		8. CITY-ST-ZIP	
TITLE	☐ DELETE	9. TITLE	☐ Change ☐ Addition
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY-ST-ZIP		12. CITY-ST-ZIP	
TITLE	☐ DELETE	13. TITLE	☐ Change ☐ Addition
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY-ST-ZIP		16. CITY-ST-ZIP	
TITLE	☐ DELETE	17. TITLE	☐ Change ☐ Addition
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY-ST-ZIP		20. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/96 411/337-3677

CR2E034 (12/95)