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PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000069151 (5)

GOLD STAR PROPERTIES, INC. Principal Place of Business Mailing Address 3909 U.S. HWY 301 N. ELLENTON FL 34222 3909 U.S. HWY 301 N. **ELLENTON FL 34222-2332** 3. Date Incorporated or Qualified 3a. Date of Last Report 09/05/1995 03/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0608401 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WELLS, LESLIE 3909 U.S. HWY 301 N. 82 Street Address (P.O. Box Number is Not Acceptable) **ELLENTON FL 34222** 83 84 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, Fiorida Statutes. (NOTE: Registered Agent signature required when roinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6) DELETE Change Addition TITLE 1.1 TITLE WELLS, LESLIE NAME 1.2 NAME 15440 RUTLAND ROAD STREET ADDRESS 1.3 STREET ADDRESS PARRISH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 1111.6 Change Addition SHARFF, PAUL A 2.2 NAME 7412 19TH AVE., N.W. STREET ADDRESS 2.3 STREET ADDRESS **BRADENTON FL 34209** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 317006 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - S1 - ZIP DELETE TITLE Change Addition 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 THUE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - ST- ZIP DELETE Change ___ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

Information indicated on this annual report or supplied under its full 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 this corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 inchanged, or on an attachment with an endress.

14. I do 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