

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 07 1997 8:00am
Secretary of State



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

PROFIT CORPORATION
ANNUAL REPORT
1997

DOCUMENT # P96000019889 (0)

1. Corporation Name
STARLING TREE SERVICE, INC.



Principal Place of Business
724 58TH STREET
WEST PALM BEACH FL 33407

Mailing Address
724 58TH STREET
WEST PALM BEACH FL 33407-2524

3. Date Incorporated or Qualified
02/29/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
650508112

Applied For
Not Applicable

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24 Zip Country

25 Country

29 Zip Country

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STARLING, WILLIE
724 58TH STREET
WEST PALM BEACH FL 33407

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 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 and title if applicable

(NOTE: Registered Agent signature required when relistings)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P STARLING, WILLIE 724 58TH STREET WEST PALM BEACH FL 33407	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STARLING, WILLIE		1.2 NAME
STREET ADDRESS	724 58TH STREET		1.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BEACH FL 33407		1.4 CITY-ST-ZIP
TITLE	S STARLING, WILLIE JR. 724 58TH STREET WEST PALM BEACH FL 33407	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STARLING, WILLIE JR.		2.2 NAME
STREET ADDRESS	724 58TH STREET		2.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BEACH FL 33407		2.4 CITY-ST-ZIP
TITLE	T STARLING, LAWRENCE T 724 58TH STREET WEST PALM BEACH FL 33407	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STARLING, LAWRENCE T		3.2 NAME
STREET ADDRESS	724 58TH STREET		3.3 STREET ADDRESS
CITY-ST-ZIP	WEST PALM BEACH FL 33407		3.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

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 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 on an attachment with an address.

SIGNATURE: *Willie Starling*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)