

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

PROFIT,  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Jun 09 1997 8:00am  
Secretary of State

DOCUMENT # P96000057229 (2)

1. Corporation Name

SOUTHERN STAR, INC.



Principal Place of Business

1221 AMBLE LANE, #2  
CLEARWATER FL 34615

Mailing Address

1221 AMBLE LANE, #3  
CLEARWATER FL 34615-3805

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

07/05/1996

3a. Date of Last Report

4. FEI Number

59-3387067

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

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

9. Name and Address of Current Registered Agent

CHRISTOFFERSON, ROY N  
1221 AMBLE LANE, #2  
CLEARWATER FL 34615

10. Name and Address of New Registered Agent

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 607.0202 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]*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/2/97

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
CHRISTOFFERSON, ROY N  
STREET ADDRESS  
1221 AMBLE LANE, #2  
CITY-ST-ZIP  
CLEARWATER FL 34615

TITLE ☐ DELETE

NAME  
CHRISTOFFERSON, PATRICIA C  
STREET ADDRESS  
1221 AMBLE LANE, #2  
CITY-ST-ZIP  
CLEARWATER FL 34615

TITLE ☒ DELETE

NAME  
FENTON, DAVID F III  
STREET ADDRESS  
124-92ND AVENUE  
CITY-ST-ZIP  
TREASURE ISLAND FL 33708

TITLE ☒ DELETE

NAME  
FENTON, DONNA R  
STREET ADDRESS  
124-92ND AVENUE  
CITY-ST-ZIP  
TREASURE ISLAND FL 33708

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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.

PRESIDENT

CR2E034 (9/96)