

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000025436

FILED
Apr 14, 2003
Secretary of State

Entity Name: HEALTHY STAR PROMOTERS, INC.

Current Principal Place of Business:

109 SUNSET PT
PALATKA, FL 32177

New Principal Place of Business:

7780 A1A S UNIT 412
SAINT AUGUSTINE, FL 32080

Current Mailing Address:

109 SUNSET PT
PALATKA, FL 32177

New Mailing Address:

7780 A1A S UNIT 412
SAINT AUGUSTINE, FL 32080

FEI Number: 59-3439286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT MOORE MACDONALD & WELLS, PA
50 N LAURA STREET
SUITE 3100
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

BRANT, ABRAHAM, REITER & MCCORMICK, P.A.
50 N LAURA STREET
SUITE 2750
JACKSONVILLE, FL 32202 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM P. BRANT

04/14/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLER, JOHN R
Address: 109 SUNSET PT.
City-St-Zip: PALATKA, FL 32177

Title: D () Delete
Name: MILLER, JUDY
Address: 109 SUNSET PT.
City-St-Zip: PALATKA, FL 32177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V-P (X) Change () Addition
Name: MILLER, JOHN R
Address: 7780 A1A S UNIT 412
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: PRES (X) Change () Addition
Name: MILLER, JUDY S
Address: 7780 A1A S UNIT 412
City-St-Zip: SAINT AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDY S. MILLER

PRES

04/14/2003

Electronic Signature of Signing Officer or Director

Date