

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

PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **997000007591**

ALL STAR VACATION HOME MANAGEMENT Inc.

FILED

99 JUL -6 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

26 N. Bermuda Ave
Kissimmee, Fl. 34741

Mailing Address

26 N. Bermuda Ave.
Kissimmee, Fl. 34741

DO NOT WRITE IN THIS SPACE

3. Date Incorporation is Qualified

12/4/97

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-3488725

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 owes the current year Intangible
Personal Property Tax

Yes No

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Susan K. Trover
211 Indiana Ave.
St. Cloud, Fl. 34769

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

Susan K. Trover

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5/21/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President
NAME Susan K. Trover
STREET ADDRESS 211 Indiana Ave.
CITY-STATE-ZIP St. Cloud, Fl. 34769

1.1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

TITLE Vice President
NAME Jo Marie Hemphill
STREET ADDRESS 14 N. Palm Ave.
CITY-STATE-ZIP Kissimmee, Fl. 34741

2.1 TITLE
22 NAME
23 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

3.1 TITLE
32 NAME
33 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

4.1 TITLE
4.2 NAME
43 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE
52 NAME
53 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE
62 NAME
63 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

Susan K. Trover

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/99 (407) 933-0733

Date

Daytime Phone #

CR27034 (11/98)

All Star
Vacation Home Management, Inc.

26 N. Bermuda Ave.
Kissimmee FL 34741
(407) 933-0733
(407) 935-1370 FAX
www.allstarvacationhomes.com

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To Whom It May Concern,

I am forwarding a copy of the Annual Report that I filed originally on April 27, 1999. I then received a request back for an additional signature. The corrected form with the additional signature was mailed back on or about June 1st.

Today I received a 2nd notice form and called to inquire as to why this was sent. I discovered that you do not have a record of receiving the notice back with the corrected signature. I was told to forward a copy with a letter requesting that any fines be waived due to the form being possibly lost.

I hereby request that the fines be waived and submit the enclosed copy of the original form.
Thank you for your help.

Sincerely,



Susan K. Trover
President
All Star Vacation Homes Inc.