## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000008907**

1. Entity Name

**GUIDING STAR SERVICE, INC.** 



FILED May 01, 2007 08:00 A Secretary of State

Principal Place of Business

438 LOS ALTOS WAY, APT. 102 ALTAMONTE SPRINGS, FL 32714 Mailing Address

P.O. BOX 162798 ALTAMONTE SPRINGS, FL 32716



## DO NOT WRITE IN THIS SPACE

04172007 No Chg-P CR2E034 (11/05)

4. FEI Number	Applied For	
59-3571214	Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HYLTON, RICHARD 438 LOS ALTOS WAY, APT. 102 ALTAMONTE SPRINGS, FL 32714

## DO NOT WRITE IN THIS SPACE

	,					
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVS HYLTON, RICHARD 438 LOS ALTOS WAY, APT. 102 ALTAMONTE SPRINGS, FL 32714					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HYLTON, RICHARD 438 LOS ALTOS WAY, APT. 102 ALTAMONTE SPRINGS, FL 32714				000000753636 05/22/07-80028-025 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
YITLE NAME						
STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						