

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****Feb 24, 2000 08:00 AM****Secretary of State****DOCUMENT # P99000048212****1. Entity Name**

CRISSTAR DEVELOPMENT GROUP, INC.

**Principal Place of Business**

201 ATP TOUR BLVD

PONTE VEDRA BEACH  
32082

FL

**Mailing Address**

201 ATP TOUR BLVD

PONTE VEDRA BEACH  
32082

FL

**2. Principal Place of Business**

300 2ND STREET NORTH

Suite, Apt. #, etc.  
19**City & State**

JACKSONVILLE BEACH

FL

Zip  
32250Country  
US**3. Mailing Address**

PO BOX 1186

Suite, Apt. #, etc.

**City & State**

PONTE VEDRA BEACH

FL

Zip  
320041186Country  
US**4. FEI Number****59-3578744****Applied For****Not Applicable****5. Certificate of Status Desired**☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**CORPORATION SERVICE COMPANY  
1201 HAYS STREETTALLAHASSEE  
323012525

US

FL

**7. Name and Address of New Registered Agent****Name**

STARK KEVIN VMR.

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

95 SANCHEZ DRIVE EAST

**City**

PONTE VEDRA BEACH

**FL****Zip Code**  
32082**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.****SIGNATURE KEVIN V. STARK**

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

(NOTE: Registered Agent signature required when reinstating)

**02/24/2000**

DATE

**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)**☒**FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State****10. Election Campaign Financing  
Trust Fund Contribution.**☐**\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32082	<input type="checkbox"/> Delete
		STARK JOANNA R	201 ATP TOUR BLVD	PONTE VEDRA BEACH	FL	32082	<input type="checkbox"/> Delete

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32082	<input type="checkbox"/> Delete
		STARK KEVIN V	201 ATP TOUR BLVD	PONTE VEDRA BEACH	FL	32082	<input type="checkbox"/> Delete

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32082	<input type="checkbox"/> Delete
							<input type="checkbox"/> Delete

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32082	<input type="checkbox"/> Delete
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							<input type="checkbox"/> Delete

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							<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32250	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		STARK JOANNA R	300 2ND STREET NORTH, SUITE 19	JACKSONVILLE BEACH	FL	32250	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32250	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		STARK KEVIN V	300 2ND STREET NORTH, SUITE 19	JACKSONVILLE BEACH	FL	32250	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32250	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
							<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32250	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
							<input type="checkbox"/> Change	<input type="checkbox"/> Addition

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	32250	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
							<input type="checkbox"/> Change	<input type="checkbox"/> Addition

**13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE** Kevin V. Stark

D 02/24/2000