## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 13, 2001 8:00 am Secretary of State DOCUMENT # 608597 STRATA REALTY, INC. 02-13-2001 90020 017 \*\*\*150.00 Principal Place of Business Mailing Address 1589 S MILITARY TR 910 S PATRICK CIR W PALM BEACH FL 33415 W PALM BCH FL 33406 919634 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number 59-1926113 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARILYN P COOK Box Number is No 910 S PATRICK CIR W PALM BCH FL 33406 SIGNATURE (NOTE: Registered FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STRATEMEYER, MADIE A NAME STREET ADDRESS 1589 S. MILITARY TR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W PALM BCH FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME COOK, MARILYN P NAME STREET ADDRESS 1589 S. MILITARY TR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W.PALM BCH. FL Delete TITLE TITLE ☐ Change ☐ Addition NAME COOK, DONALD R. NAME STREET ADDRESS 1589 S. MILITARY TR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP W.PALM BCH. FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARILYN P COOK NAME NAME STREET ADDRESS STREET ADDRESS 910 S PATRICK CIR CITY-ST-ZIP CITY-ST-7IP W. PALM BCH. FL TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 traffice empowered to execute this report as required by Chanter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

with all other like empor

INTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment wit

SIGNATUR

SIGNATURE: