


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # 516997	
1. Entity Name TRIESTER INTERNATIONAL REALTY CORPORATION	

Principal Place of Business 101 SEABREEZE BLVD MGMT OFFICE DAYTONA BEACH, FL 32118	Mailing Address 111 PRESIDENTIAL BOULEVARD, SUITE 230 BALA CYNWYD, PA 19004
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01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1697244	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

TRIESTER, STANTON L.
100 & 101 SEABREEZE BOULEVARD
DAYTONA BEACH, FL 32118

**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 _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	TRIESTER, STANTON L.
STREET ADDRESS	101 SEABREEZE BLVD
CITY-ST-ZIP	DAYTONA BEACH, FL 32118
TITLE	S
NAME	NORSWORTHY, JEAN
STREET ADDRESS	111 PRESIDENTIAL BL.#230
CITY-ST-ZIP	BALA CYNWYD, PA
TITLE	VP
NAME	MAISTO, VINCENT
STREET ADDRESS	35 KINGS HIGHWAY EAST
CITY-ST-ZIP	HADDONFIELD, NJ
TITLE	VP
NAME	TRIESTER, SONIA C
STREET ADDRESS	35 KINGS HIGHWAY EAST, 112
CITY-ST-ZIP	HADDONFIELD, NJ
TITLE	AS
NAME	CARAPUCCI, DENISE
STREET ADDRESS	35 KINGS HWY E
CITY-ST-ZIP	HADDONFIELD, NJ
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000191890
01/24/05-80192-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **STANTON L. TRIESTER** **1/6/05 (610) 667-5400**