


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2005 08:00 AM
Secretary of State

DOCUMENT # 608597 1. Entity Name STRATA REALTY, INC.	
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Principal Place of Business 1589 S. MILITARY TR. W. PALM BEACH, FL 33415	Mailing Address 8656 WENDY LANE EAST WEST PALM BEACH, FL 33411 US
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01252005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1926113	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MARILYN P COOK 8656 WENDY LANE EAST WEST PALM BEACH, FL 33411

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

**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 NAME STREET ADDRESS CITY-ST-ZIP	VC STRATEMEYER, MADIE A 1589 S. MILITARY TR. W. PALM BCH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COOK, MARILYN P 1589 S. MILITARY TR. W. PALM BCH., FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COOK, DONALD R. 1589 S. MILITARY TR. W. PALM BCH., FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARILYN P COOK 8656 WENDY LANE EAST WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/04/05-80014-004 150.00

**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 19.07(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Sec.**  **2/1/05** **561-784-8688**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #