


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90031 042 ***150.00

DOCUMENT # P02000059205 1. Entity Name SRTR, INC					
Principal Place of Business 20486 THE GRANADA #4 DUNNELLON, FL 34432			Mailing Address PO BOX 956 DUNNELLON, FL 34430		
2. Principal Place of Business - No P.O. Box # 20093 E PENNSYLVANIA AVE		3. Mailing Address Suite, Apt. #, etc. #1			
City & State DUNNELLON FL		City & State Suite, Apt. #, etc. #1		02242007 Chg-P CR2E034 (12/06)	
Zip 34432		Country MARION		4. FEI Number 75-3061797	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROUNTREE, SHARON 20486 THE GRANADA #4 DUNNELLON, FL 34432			7. Name and Address of New Registered Agent Name ROUNTREE SHARON Street Address (P.O. Box Number is Not Acceptable) 4692 N LAKE VISTA TRAIL City HERNANDO FL Zip Code 34442		
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 <u><i>Sharon Rountree</i></u> 13/5/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ROUNTREE, SHARON 20486 THE GRANADA # 4 DUNNELLON, FL 34432 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ROUNTREE SHARON 4692 N LAKE VISTA TRAIL HERNANDO, FL 34442 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD ROUNTREE, THOMAS 20486 THE GRANADA #4 DUNNELLON, FL 34432 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD ROUNTREE THOMAS 4692 N LAKE VISTA TRAIL HERNANDO, FL 34442 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 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: <u><i>Sharon Rountree</i></u> 13/5/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					