


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2006 8:00 am
Secretary of State

05-30-2006 90040 007 ***558.75

DOCUMENT # P05000061527

1. Entity Name
NORSTAR CONSTRUCTION, INC.



Principal Place of Business 3460 NORTH KEY DRIVE UNIT # 221 E N. FORT MYERS, FL 33903 US	Mailing Address 3460 NORTH KEY DRIVE UNIT # 221 E N. FORT MYERS, FL 33903 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



05242006 Chg-P CR2E034 (11/05)

FBI Number 20-2752761	Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**TREMONTI, FRANK V
 3460 NORTH KEY DRIVE
 UNIT # 221 E
 N. FORT MYERS, FL 33903**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 resigning) DATE _____

**FILE NOW!!! FEE IS \$550.00
 Due by September 6, 2006**

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	P TREMONTI, FRANK V 3460 NORTH KEY DRIVE, UNIT # 221 E N. FORT MYERS, FL 33903 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TREMONTI, JUDITH A 3460 NORTH KEY DRIVE, UNIT # 221 E N. FORT MYERS, FL 33903 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SULARSKI, MACIEJ 3750 COLLINS RD OAKLAND, MI 48363 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. MACIEJ FULARSKI <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3750 COLLINS RD OAKLAND, MI 48363
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. FRANK V TREMONTI <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3460 N. KEY DR #221E N. FORT MYERS, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER FRANK V TREMONTI <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3460 N. KEY DR #221E N. FORT MYERS, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT. JUDITH A. TREMONTI <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3460 N. KEY DR #221E N. FORT MYERS, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Judith A. Tremonti Date: 5-24-06