

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000007926

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Entity Name:** STERLING MORTGAGE SERVICES OF THE TREASURE COAST, INC.

**Current Principal Place of Business:**

100 SOUTHWEST ALBANY AVENUE  
SUITE 300  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

100 SOUTHWEST ALBANY AVENUE  
SUITE 300  
STUART, FL 34994 US

**New Mailing Address:**

**FEI Number:** 65-0385121      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ZARRO, PASQUALE G  
124 N SEAWALLS POINT RD  
STUART, FL 34996 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPTS  
Name: ZARRO, PASQUALE G  
Address: 124 N SEAWALLS POINT RD  
City-St-Zip: STUART, FL 34996

Title: VP  
Name: ZARRO, JOANNE  
Address: 513 SW NORTH CAROLINA DRIVE  
City-St-Zip: STUART, FL 34994

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: PASQUALE G ZARRO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DPTS

03/25/2011

\_\_\_\_\_  
Date