

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # V31141

1. Entity Name
STR REALTY, INC.



Principal Place of Business
2459 MALCOM DRIVE
PALM HARBOR, FL 34684

Mailing Address
2459 MALCOM DRIVE
PALM HARBOR, FL 34684



01222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3121051

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POTTER, MATTHEW A
5940 MAIN ST
NEW PORT RICHEY, FL 34652

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME PALAZZOLO, SALVATORE
STREET ADDRESS 2459 MALCOLM DRIVE
CITY - ST - ZIP PALM HARBOR, FL

TITLE V
NAME PALAZZOLO, THOMAS
STREET ADDRESS 2103 RIVER DALE DR.
CITY - ST - ZIP NEW PORT RICHEY, FL 34653

TITLE T
NAME PALAZZOLO, RALPH
STREET ADDRESS 5127 HALTATA COURT
CITY - ST - ZIP NEW PORT RICHEY, FL 34655

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000410926
02/03/06-80045-022 150.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

Ralph Palazzolo Ralph Palazzolo

1/25/06

727-848-7135

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #