

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N00000003078

1. Corporation Name

SIESTA BAYSIDE SOUTH CONDOMINIUM
ASSOCIATION, INC.

2. Principal Office Address

9207 Midnight Pass Road

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34242

Country

USA

3. Mailing Office Address

9207 Midnight Pass Road

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34242

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

5/4/2000

5. FEI Number

65-1046542

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Johnson S. Savary, Jr., Esq.

Street Address (P.O. Box Number is Not Acceptable)

22 South Links Avenue

Suite, Apt. #, Etc.

300

City

Sarasota

State
FL

Zip Code

34236

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

**Signature of
Registered Agent**

Date

7-11-03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Carrie Caudill	9209 Midnight Pass Road	Sarasota, FL 34242
T/D	Joanne Sheffel	9207 Midnight Pass Road	Sarasota, FL 34242
S/D	Pamela Levine	9203 Midnight Pass Road	Sarasota, FL 34242

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

, Pamela Levine
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/11/03

Daytime Phone #

(941)346-1162

FILED
CLERK OF CIRCUIT COURT
DIVISION OF CORPORATIONS
03 JUL 16 AM 11:42

900021745209
07/23/03--01048--023

CR2001 (10/02)

July 11, 2003

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

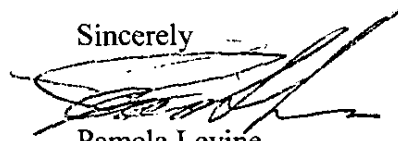
Re: Siesta Bayside South Condominium Association, Inc. ("Association")

Dear Sir or Madam:

Please be advised that the undersigned is an officer of the above captioned corporation. It has recently come to my attention that the Association has been administratively dissolved. This matter was to have been handled by the original developer and the property management company which took over running the Association after turn-over. Obviously, this has never happened. In fact, the listing on sunbiz.org still reflects the original developer who has been out of this project for more than two (2) years. Accordingly, the Association, has never received the UBR or any other notices from the Division of Corporations and would therefore request that the \$175.00 reinstatement fee be waived.

Please give me a call (941) 346-1162 if there are any questions or concerns regarding this matter.

Sincerely



Pamela Levine