FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT

N00540

(7)

	SIESTA CONDOMINIUM AS				
Principal Place of Business Malling Address					irgii mimir gibit mimir mimir mihir jhür
LIGHT MANAGEMENT & REALTY 16 CHURCH ST OSPREY FL 34229 US		16 CHURCH STREET OSPREY FL 34229-8349 US		3. Date Incorporated or Qualified 12/22/1983 4. FEI Number	Applied For
				59-2211066	Not Applicable
2. Principal Place of Business		2a. Mailing Address 26		5. Certificate of Status Desired] \$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
City & State		City & State		Trust Fund Contribution	
23		28		7. Is this nonprofit corporation a home	owners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid th	ne current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curren	1 Registered Agent		10. Name and Address of New Regist	ered Agent
			81 Name	seph Micale	_
DIGHTHOUSE MANAGEMENT-8-REALTY 16 CHURCH SD				rese (I.O. Box Number is Not acceptable)	soc. Inc.
OSPRE	X-FC 34220		83 /0 /	6 Chucch St.	
-			9°000	0011-	FL 85 Zip Code Q
11. Pursuant office or	to the provisions of Sections 617.050; registered agent, or both, in the State	2 and 617.1508, Florida Statute of Florida. Such change was a	the above-named corruthorized by the corporat	poration submits this statement for the purplion's board of directors hereby accept the	ose of changing its registered e appointment as registered
		illions of, Section 617.0503/Flor	rida Statutes.	1:11/1 -11/1	4/12/00
SIGNATURE-	Signature, typed or printed name of registered age	nt and title if applicable. (NOTP	Registered Agent signature requil	PRI when wheel the D	WE -
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12
TITLE	VPD	DELETE	1.1 TITLE		Change Addition
NAME	FAY, GEORGE		12 NAME	AU. GEORGE DON	2/
STREET ADDRESS	5911 MIDNIGHT PASS RD.		1.3 STREET ADDRESS 53	my George Mass K	u .
CITY-ST-2NP	SARASOTA FL		1.4 City-St-zip	HEASOTA FL	
TITLE	SD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LEFINO, CHARLES		2.2 NAME		
STREET ADDRESS	420 BEACH RD. #809		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2. 4 CITY-ST-ZIP		
TITLE	D	DELETE	2 1 TITLE 10	D. T /	Change
HAME	MICALE, JOSEPH		3.2 NAME	icace Toseph PVI Mid Night PASS Rd PRASOHA, FL	,
STREET ADDRESS	5911 MIDNIGHT PASS RD.		3.3 STREET ADDRESS 59	WIN MINNIGHT PASS NO	•
CITY - ST - ZNP	SARASOTA FL		3.4. CITY-ST-ZIP \$74	RASOTA, FL	
TITLE	10	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WEISS, HARRIET		4. 2 NAME		
STREET ADDRESS	5911 MIDNIGHT PASS RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		4.4 CITY - ST - ZIP		
TITLE	D	DELETE	5.1 TITLE		Change Addition
NAME	SAWERS, BARBARA	• •	5.2 NAME		
STREET ADDRESS	20 ELLIOTWOOD CT.		5.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH YORK ON		5.4 CITY-ST-ZIP		
TITLE	ASD	☐ DELETE	6.1 TITLE		Change Addition
NAME	KENTH, LLOYD		6.2 NAME		!
STREET ADDRESS	16 CHURCH ST.		6.3 STREET ADDRESS		;

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is tros and accurate end 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 this tee empowered to execute this eport as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attactly.

SIGNATURE: (X)

3-18-98

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FILED

Apr 29 1998 8:00am

Secretary of State