2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 01, 2007
Secretary of State

DOCUMENT# P03000018786

Entity Name: SEASIDE RESORT RENTAL & MANAGEMENT, INC.

Current Principal Place of Business:

1715 STICKNEY POINT ROAD
#C8
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

1715 STICKNEY POINT ROAD
#C8
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 57-1151149 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAMS, LAURIE B ESQ.
2815 PROCTOR ROAD
SARASOTA, FL 34231 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: D ( ) Delete
Name: HURST, DIANA
Address: 1715 STICKNEY POINT ROAD #C8
City-St-Zip: SARASOTA, FL 34242

Title: DP ( ) Delete
Name: CRAIN, RONNALYN H
Address: 1715 STICKNEY PT RD #C8
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Delete
Name: SLATER, BRUCE E
Address: 1715 STICKNEY PT #C8
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: RONNALYN H. CRAIN DP 11/01/2007

Electronic Signature of Signing Officer or Director — Date