

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000037662

FILED  
Feb 16, 2005  
Secretary of State

Entity Name: SIERRA ASSET MANAGEMENT, INC.

## Current Principal Place of Business:

2937 BEACH BLVD  
GULFPORT, FL 33737 US

## New Principal Place of Business:

7156 S SHORE DR  
SOUTH PASADENA, FL 33707 US

## Current Mailing Address:

P.O. BOX 5202  
GULFPORT, FL 33737 US

## New Mailing Address:

310 FOOTHILL ROAD  
GARDNERVILLE, NV 89460 US

FEI Number: 59-3677837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KINGSETT, ALEXANDRA  
2937 BEACH BLVD  
GULFPORT, FL 33707 US

## Name and Address of New Registered Agent:

KINGZETT, ALEXANDRA  
7156 SOUTH SHORE DR  
S PASADENA, FL 33707 US

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: ALEXANDRA KINGZETT

02/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KINGZETT, ALEXANDRA R  
Address: 2937 BEACH BLVD  
City-St-Zip: GULFPORT, FL 33737

Title: VP ( ) Delete  
Name: KINGZETT, JAMES  
Address: 2937 BEACH BLVD  
City-St-Zip: GULFPORT, FL 33737

Title: STVD ( ) Delete  
Name: LETOURNEAU, SUZANNE  
Address: 2937 BEACH BLVD  
City-St-Zip: GULFPORT, FL 33737

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: KINGZETT, ALEXANDRA R  
Address: 7156 SOUTH SHORE DR  
City-St-Zip: S PASADENA, FL 33707 US

Title: VP (X) Change ( ) Addition  
Name: KINGZETT, JAMES  
Address: 7156 SOUTH SHORE DR  
City-St-Zip: S PASADENA, FL 33707 US

Title: STVD (X) Change ( ) Addition  
Name: KINGZETT, JAMES  
Address: 7156 S SHORE DR  
City-St-Zip: S PASADENA, FL 33707 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEXANDRA KINGZETT

PD

02/16/2005

Electronic Signature of Signing Officer or Director

Date