

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003078

**Entity Name:** SIESTA BAYSIDE SOUTH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9205 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242

**Current Mailing Address:**

11795 STRATHAM DR.  
ALPHARETTA, GA 30009 US

**FEI Number:** 65-1046542

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SIESTA BAYSIDE SOUTH ASSOC.  
9209 MIDNIGHT PASS RD  
SARASOTA, FL 34242 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MATTER, JOHN C  
Address        9203 MIDNIGHT PASS RD  
City-State-Zip: SARASOTA FL 34242

Title            TREASURER  
Name            FONDY, TIMOTHY LEWIS  
Address        11795 STRATHAM DR.  
City-State-Zip: ALPHARETTA GA 30009

Title            SECRETARY  
Name            MELTON, SUSAN  
Address        9205 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIMOTHY L. FONDY

**TREASURER**

**01/31/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date