

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009359

Entity Name: SIESTA BAY R.V. RESORT RESIDENTS ASSOCIATION, INC.**Current Principal Place of Business:**19333 SUMMERLIN ROAD #58
FORT MYERS, FL 33908**Current Mailing Address:**19333 SUMMERLIN RD
#37
FORT MYERS, FL 33908 US**FEI Number:** 36-4517552**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAVIS, BOB
19333 SUMMERLIN RD. #124
FORT MYERS, FL 33908 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	P
Name	OTTE, JOAN A
Address	19333 SUMMERLIN RD #643
City-State-Zip:	FORT MYERS FL 33908

Title	VP
Name	ARMSTRONG, RANCE
Address	19333 SUMMERLIN RD #746
City-State-Zip:	FORT MYERS FL 33908

Title	D
Name	LAVIOLETTE, PIERRE
Address	19333 SUMMERLIN RD. #553
City-State-Zip:	FORT MYERS FL 33908

Title	D
Name	DESCHRYVER, JOYCE
Address	19333 SUMMERLIN RD #182
City-State-Zip:	FORT MYERS FL 33908

Title	T
Name	PARSONS, GLORIA
Address	19333 SUMMERLIN RD #37
City-State-Zip:	FORT MYERS FL 33908

Title	S
Name	PITSCH, LINDA
Address	19333 SUMMERLIN RD #374
City-State-Zip:	FORT MYERS FL 33908

Title	D
Name	OLIVER, HARRY
Address	19333 SUMMERLIN RD #279
City-State-Zip:	FORT MYERS FL 33908

Title	D
Name	PETERS, JAY
Address	19333 SUMMERLIN RD #294
City-State-Zip:	FORT MYERS FL 33908

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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: GLORIA PARSONS**TREASURER****04/24/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	D
Name	MADDEN, ROCKY
Address	19333 SUMMERLIN RD #421
City-State-Zip:	FORT MYERS FL 33908