2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT #701816

1. Entity Name

FILED Feb 12, 2007 8:00 am Secretary of State 02-12-2007 90113 007 ****61.25

SIESTA ROYALE APARTMENTS, INC.							
		Mailing Address 6334 MIDNIGHT PASS R SARASOTA, FL 34242	OAD	400153		11 618WIB) 6 1 18 6 1	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01192007 Chg-NP CR2E037 (12/06)		
City & State		City & State		4. FEI Number 59-091894	4. FEI Number Applied For 59-0918948 Not Applied For		
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired	Additional juired	
	6. Name and Address of Current	t Registered Agent		7. Name and Add	ress of New Registered Agent		
KNDEFER, KENNETH F CPA			Name	Name			
	F GATE DR. 'A, FL 34231		Street Address ((P.O. Box Number is Not Acceptable)		
			City		FL Zip	Code	
8. 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. I am familiar with, and accept the obligations of registered agent							
A HTV Ada DA V 16EV 15. DA 1/2./47							
SIGNATURE Signature, typed or princed name of registered agent and title if populable. (NOTE: Registered Agent signature required when reinstating) DATE							
Filing Fee is \$61.25 9. Election Campaign Financing							
	Filing Fee is \$61.25	9. Election Cam	paign Financing	\$5 00 May Be	Make check payab	le to	
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campus Fund Co		\$5.00 May Be Added to Fees	Florida Department o	of State	
10.	Due by May 1, 2007 OFFICERS AND DI	Trust Fund Co	ontribution.	Added to Fees ADDITIONS/CHANGE	Florida Department of the STO OFFICERS AND DIRECTOR	of State S IN 10	
TITLE	OFFICERS AND DI	Trust Fund Co	ontribution. 11. IIILE PI	Added to Fees ADDITIONS/CHANGE	Florida Department of ES TO OFFICERS AND DIRECTOR	S IN 10	
TITLE NAME	OFFICERS AND DI PD GORMAN, WILLIAM E.	Trust Fund Co	ontribution.	Added to Fees ADDITIONS/CHANGE MIDT, THO MI	Florida Department of ES TO OFFICERS AND DIRECTOR	of State S IN 10	
TITLE	OFFICERS AND DI PD GORMAN, WILLIAM E. 6530 N. ALGONQUIN AVENUE	Trust Fund Co	ntribution.	Added to Fees ADDITIONS/CHANGE MIDT THO MI BUNKER F	Florida Department of STO OFFICERS AND DIRECTOR Characters AND DIRECTOR Characters AND Character	of State S IN 10	
TITLE NAME STREET ADDRESS	OFFICERS AND DI PD GORMAN, WILLIAM E.	Trust Fund Co	11. IITLE PI NAME SC STREET ADDRESS 3. CITY-ST-ZIP D	Added to Fees ADDITIONS/CHANGE HMIDT, THO MI BUNKER L SPREY FL	Florida Department of ES TO OFFICERS AND DIRECTOR	of State S IN 10 nge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2007 OFFICERS AND DI PD GORMAN, WILLIAM E. 6530 N. ALGONQUIN AVENUE CHICAGO, IL	Trust Fund Co	Intribution.	Added to Fees ADDITIONS/CHANGE HMIDT THO MI 96 BUNKER L SPREY FL TD ENNIG WILLIAM	Florida Department of ESTO OFFICERS AND DIRECTOR TO Cha	of State S IN 10 nge	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May 1, 2007 OFFICERS AND DI PD GORMAN, WILLIAM E. 6530 N. ALGONQUIN AVENUE CHICAGO, IL VD SCHMIDT, THOMAS 396 BUNKER HILL OSPREY, FL 34229 D	Trust Fund Co	ITILE PITTLE SC STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDR	Added to Fees ADDITIONS/CHANGE HHIDT, THOMING BUNKER, SPRBY, FL TD ENNIG, WILLIA 359 Jesolo La arasota, FL TVPD	Florida Department of ES TO OFFICERS AND DIRECTOR Character STORY Character ST	of State S IN 10 Addition Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May 1, 2007 OFFICERS AND DI PD GORMAN, WILLIAM E. 6530 N. ALGONQUIN AVENUE CHICAGO, IL VD SCHMIDT, THOMAS 396 BUNKER HILL OSPREY, FL 34229 D MCDONALD, WILLIAM 311 PINE RUN DR. OSPREY, FL D WARNELL, RON 6334 MIDNIGHT PASS RD SARASOTA, FL SD HENNING, WILLIAM	Trust Fund Co	ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/CHANGE BUNKER + SPREY FL TD ENNIG, WILLIA 359 Jesolo La arasota. FL TVPD ATKINS, HARR 4 FRANKLIN 4 FRANKLIN 4 FRANKLIN 15 VPD RWILLIGER H 29 CARR RIS AVISON MI	Florida Department of ES TO OFFICERS AND DIRECTOR AS HILL 34229	of State S IN 10 Inge Addition Addition Inge Addition Inge Addition	
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the boy cently that the information supplied which this billing does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

illian M. Hennig WILLIAM SIGNATURE AND TYPED OR PRINTED NAME OF STRING OFFICER OR DIRECTOR WILLIAM M. HENNIG 926-7287 SIGNATURE: 2