

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701816

FILED
Jan 04, 2011
Secretary of State

Entity Name: SIESTA ROYALE APARTMENTS, INC.

Current Principal Place of Business:

6334 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

6334 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 59-0918948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNDEFER, KENNETH F CPA
2262 GULF GATE DR.
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: 1VPD
Name: WATKINS, HARRY
Address: 204 FRANKLIN ST
City-St-Zip: UHRICHSVILLE, OH 44683

Title: PD
Name: SCHMIDT, THOMAS
Address: 396 BUNKER HILL
City-St-Zip: OSPREY, FL 34229

Title: D
Name: MCDONALD, WILLIAM
Address: 311 PINE RUN DR.
City-St-Zip: OSPREY, FL

Title: D
Name: WARNELL, RON
Address: 6334 MIDNIGHT PASS RD
City-St-Zip: SARASOTA, FL

Title: STD
Name: HENNIG, WILLIAM
Address: 8359 JESOLO LANE
City-St-Zip: SARASOTA, FL 34238

Title: 2VPD
Name: TERWILLIGER, CARL
Address: 11499 CARR RD
City-St-Zip: DAVISON, MI 48423

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: THOMAS SCHMIDT

PRES

01/04/2011

Electronic Signature of Signing Officer or Director

Date