2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 23, 2005
Secretary of State

DOCUMENT# 744011

Entity Name: SIESTA GULF VIEW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

420 BEACH RD
SARASOTA, FL 34242 US

New Principal Place of Business:

Current Mailing Address:

420 BEACH RD
SARASOTA, FL 34242 US

New Mailing Address:

FEI Number: 59-2293403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE LAW OFFICES OF LOBECK HANSON & WELLS,
P.A.- ATTN: KEVIN T WELLS, ESQ.
1033 MAIN ST, SUITE 403
SARASOTA, FL 34237 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: PD ( ) Delete
Name: RUSSO, KENNETH
Address: 420 BEACH RD.
City-St-Zip: SARASOTA, FL 34242

Title: SD ( ) Delete
Name: PROCASSINI, CARMINE
Address: 226 ST ANDREY CT
City-St-Zip: HOLMDEL, NJ 07733

Title: VP ( ) Delete
Name: MANSER, GEORGE
Address: 420 BEACH ROAD
City-St-Zip: SARASOTA, FL 34242

Title: TD ( ) Delete
Name: MEYER, DAVID
Address: 420 BEACH ROAD
City-St-Zip: SARASOTA, FL 34242

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: MANSER, GEORGE
Address: 420 BEACH ROAD
City-St-Zip: SARASOTA, FL 34242

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: CROSSETT, GEORGE
Address: 420 BEACH ROAD
City-St-Zip: SARASOTA, FL 34242

Title: VP ( ) Change (X) Addition
Name: TRIMPE, JULIE A
Address: 381 INTERSTATE BLVD
City-St-Zip: SARASOTA, FL 34240

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

SIGNATURE: JULIE TRIMPE VP 07/23/2005
Electronic Signature of Signing Officer or Director — Date