

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2003 8:00 am
Secretary of State

02-27-2003 90147 003 ****61.25

DOCUMENT # 766835

1. Entity Name

TERRA SIESTA CO-OP, INC.



Principal Place of Business

Mailing Address

3502 PATRICIA PLACE
ELLENTON FL 34222
US

3900 CLARK ROAD
SUITE L-1
SARASOTA FL 34233
US

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2372198

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

DOMBER, HARLAN R
3900 CLARK ROAD
SUITE L-1
SARASOTA FL 34233

7. Name and Address of New Registered Agent

Name

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.

SIGNATURE

Cornelius J. Schoonejongen / PRESIDENT

2-29-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
VD	PARDONNET, WAYNE L	8109 MARIE LANE	ELLENTON FL	<input type="checkbox"/>
SD	COLMAN, MARTHA	3331 EILEEN DR.	ELLENTON FL 34222	<input type="checkbox"/>
TD	HAAK, BARBARA	7712 AUDRY LANE	ELLENTON FL 34222	<input type="checkbox"/>
D	MADDOCK, WILLIAM	3108 DONNA DR	ELLENTON FL 34222	<input type="checkbox"/>
PD	SCHOONEJONGEN, CORNELIUS	8301 NANCY LANE	ELLENTON FL	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE:

Cornelius J. Schoonejongen / PRESIDENT 2/24/03

CR2E037 (10/02)