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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400002531 (1)

SIESTA DUNES UNIT 6228B CORPORATION

68 KERRIGAN CRESCENT 68 KERRIGAN CRESCENT UNIONVILLE. ONTARIO UNIONVILLE. ONTARIO CANADA L3R 787 CANADA L3R 787 3. Date Incorporated or Qualified 3a. Date of Last Report 05/16/1994 02/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 98-0121735 21 26 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Zιρ ZiD 8. This corporation has liability for intangible tax under s. 199.032. Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LAMBRECHT, WILLIAM G 1550 RINGLING BOULEVARD Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, Typical or proceed name of registered agent and little clappicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICE HS AND DIRECTORS 13. Change Addition PD DELETE TITLE 1.1 TITLE STRIKE, C G 1.2 NAME NAME **68 KERRIGAN CRESCENT UNIONVILLE ONTARIO** STREET ADDRESS 13 STREET ADDRESS CANADA L3R 7S7 CITY-ST-ZIP 14 City-St-ZIP SD DELETE Change Addition 21 TITLE TITLE STRIKE, JOAN 22 NAME NAME **68 KERRIGAN CRESCENT UNIONVILLE ONTARIO** 2 3 STREET ADDRESS STREET ADORESS CANADA L3R 7S7 CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$T - ZIP DITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 52 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY - ST - ZIP CITY - ST - ZIF DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP CITY - ST - ZIP 14. I do 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 annual report or supplemental annual 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 those certific 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 those certific true and accurate this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or Block 13 if changed,

SIGNAYURE AND TYPECOR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

JAN 21.1997

905-474-1974

FILED

Jan 28 1997 8:00am

Secretary of State

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CR2E034 (9/96)