2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000008237

Name:

Address: City-St-Zip:

Entity Name: THE ALLIANCE FOR SIESTA KEY'S FUTURE, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	ORD DRIVE A, FL 34242					
Current Mailing Address:			New Mailing Address:			
5053 OCE SUITE 400 SARASOT						
FEI Number	: 41-2035574	FEI Number Applied For ()	FEI Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	Address o	of New Registered Agent:	
BROOKS, 1721 SE 3 CAPE CO		l US				
	e named entity s e of Florida.	submits this statement for the	purpose of changing it	s registere	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	T/D () KOUBA, JOSEF 4894 OXFORD SARASOTA, FL	DRIVE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	P/D () KAPLAN, ANN H 5045 OXFORD SARASOTA, FL	DR	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D () KAPLAN, RICHA 5045 OXFORD SARASOTA, FL	DR	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S/D () HALL-SMITH, M 713 TREASURE SARASOTA, FL	BOAT WAY	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	()	Delete	Title:	VP/D	() Change (X) Addition	

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.

Name:

Address:

City-St-Zip:

RAMIREZ, LOURDES 5131 SAINT ALBANS AVENUE

SARASOTA, FL 34242

SIGNATURE: JOSEPH E. KOUBA T/D 04/30/2003