

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003143

FILED
Mar 09, 2007
Secretary of State

Entity Name: SIENA AT MIROMAR LAKES NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

1044 CASTELLO DRIVE
SUITE 206
NAPLES, FL 34103

New Mailing Address:

FEI Number: 73-1646687 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SOUTHWEST PROPERTY MGMT
1044 CASTELLO DR
SUITE 206
NAPLES, FL 34103 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: P () Delete
Name: MERVES, MARVIN
Address: 10450 VIA BALESTRI DRIVE
City-St-Zip: MIROMAR LAKES, FL

Title: S () Delete
Name: FRANK, DAVID
Address: 10440 VIA BALESTRI DRIVE
City-St-Zip: MIROMAR LAKES, FL

Title: T () Delete
Name: SHERWOOD, JOHN
Address: 10485 VIA BALESTRI DRIVE
City-St-Zip: MIROMAR LAKES, FL

Title: VP () Delete
Name: REFKIN, MARTHA
Address: 10435 VIA BALESTRI DRIVE
City-St-Zip: MIROMAR LAKES, FL 33913

Title: D () Delete
Name: LAMBERT, ALAN
Address: 10410 VIA BALESTRI DRIVE
City-St-Zip: MIROMAR LAKES, FL 33913

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARVIN MERVES

P

03/09/2007

Electronic Signature of Signing Officer or Director

_____ Date