2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# N05000000351

Entity Name: SIENA AT CELEBRATION MASTER ASSOCIATION, INC.

Current Principal Place of Business:

745 SIENA PALM DRIVE
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

745 SIENA PALM DRIVE
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 20-2304138 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DURAN, REBECCA
745 SIENA PALM DRIVE
CELEBRATION, FL 34747 US

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: REBECCA DURAN 04/24/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SALLER, DENNIS
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DVT ( ) Delete
Name: COLON, RICHARD
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DS ( ) Delete
Name: DAVID, RICHARD
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: COLAN, RICHARD
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DVT (X) Change ( ) Addition
Name: HANZEL, SHARON
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DS (X) Change ( ) Addition
Name: SKIP, DIRIENZO
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

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: RICHARD COLAN DP 04/24/2007
Electronic Signature of Signing Officer or Director Date