

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000354

FILED
Feb 17, 2009
Secretary of State

Entity Name: SIENA AT CELEBRATION CONDOMINIUM "B" ASSOCIATION, INC.

Current Principal Place of Business:

745 SIENA PALM DRIVE
CELEBRATION, FL 34742

New Principal Place of Business:

745 SIENA PALM DRIVE
CELEBRATION, FL 34747

Current Mailing Address:

745 SIENA PALM DRIVE
CELEBRATION, FL 34742

New Mailing Address:

745 SIENA PALM DRIVE
CELEBRATION, FL 34747

FEI Number: 20-2304284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSEN, RICHARD E
55 EAST PINE STREET
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SIENA CONDOMINIUM
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: JOSE A. RUIZ

02/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

Title: DS () Delete
Name: OLIVER, ALLEN
Address: 745 SIENA DR
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: OLIVER, ALLEN
Address: 745 SIENA PALM DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DS (X) Change () Addition
Name: CRUDO, ALAN
Address: 745 SIENA DR
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify 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: JOSE A. RUIZ

LCAM

02/17/2009

Electronic Signature of Signing Officer or Director

Date