

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 11, 2006  
Secretary of State**

DOCUMENT# N05000010700

Entity Name: SIESTA POINTE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2033 MAIN STREET STE 600  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2033 MAIN STREET STE 600  
SARASOTA, FL 34237

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ICARD MERRILL CULLIS TIMM FUREN & GINSBURG  
ATTN: STEPHEN D RESS  
2033 MAIN STREET STE 600  
SARASOTA, FL 34237 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:                      DP                      ( ) Delete  
Name:                      MOYNIHAN, JAMES M  
Address:                      85 COCOANUT AVENUE E 600  
City-St-Zip:                      SARASOTA, FL 34236

Title:                      DV                      ( ) Delete  
Name:                      ROSS, ELLEN  
Address:                      85 COCOANUT AVENUE E 600  
City-St-Zip:                      SARASOTA, FL 34236

Title:                      DS                      ( ) Delete  
Name:                      WINFREE, ROB  
Address:                      4349 PINE MEADOW TERRACE  
City-St-Zip:                      SARASOTA, FL 34233

**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:

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: JAMES M. MOYNIHAN

DP

04/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date