2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30905

FILED Mar 19, 2009 Secretary of State

Entity Name: SIENNA VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2510 N.W. 97 AVENUE, STE 200 DORAL, FL 33172 ÚS

Current Mailing Address: New Mailing Address:

2510 N.W. 97 AVENUE, STE 200 DORAL, FL 33172

FEI Number: 65-0173330 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:

PIQUE, SLYVIA C/O EXCEL MANAGEMENT 2510 NW 97TH AVE #200 DORAL, FL 33172 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

FISCHER, IMELDA COMIN, URSULA Name: Name:

14340 SW 57TH LN SUITE 104 Address: 2510 NW 97 AVENUE #200 Address:

DORAL, FL 33172 City-St-Zip: MIAMI, FL 33183 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

Name: JORGON, ABELS Name: Address: 14260 SW 57 LANE #204 Address: City-St-Zip: MIAMI, FL 33183 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

JORGE, RODRIGUEZ Name: JORGE, RODRIGUEZ Name: 14340 SW 57 LANE #204 2510 NW 97 AVENUE #200 Address: Address:

City-St-Zip: MIAMI, FL 33183 City-St-Zip: DORAL, FL 33172

Title: TD () Delete Title: TD (X) Change () Addition

Name: SUAREZ, ELBA Name: SUAREZ, ELBA 14345 SW 57TH AVE SUITE 10 2510 NW 97 AVENUE #200 Address: Address:

City-St-Zip: MIAMI, FL 33183 City-St-Zip: DORAL, FL 33172

Title: () Delete Title: (X) Change () Addition

VILLAR, ROSA VILLAR, ROSA Name: Name:

14325 SW 57TH LN SUITE 9 2510 NW 97 AVENUE #200 Address: Address:

City-St-Zip: MIAMI, FL 33183 City-St-Zip: DORAL, FL 33172

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: SYLVIA PIQUE MGR 03/19/2009