

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000257

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Entity Name:** SIENNA FOREST OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11877 TANYA TERRACE EAST  
JACKSONVILLE, FL 32223 US

**New Principal Place of Business:**

920 3RD STREET  
SUITE B  
NEPTUNE BEACH, FL 32266 US

**Current Mailing Address:**

P O BOX 600374  
JACKSONVILLE, FL 32260 US

**New Mailing Address:**

920 3RD STREET  
SUITE B  
NEPTUNE BEACH, FL 32266 US

**FEI Number:** 59-3364948

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENT, STEVE  
11877 TANYA TERRACE EAST  
JACKSONVILLE, FL 32223 US

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

WALLACE, DENISE L  
920 THIRD STREET  
SUITE B  
NEPTUNE BEACH, FL 32266 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: DENISE WALLACE

03/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HOLCOMB, LEROY  
Address: 2797 CARLENE COURT  
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP  
Name: WATERS, ALEX  
Address: 11828 TANYA TERRACE EAST  
City-St-Zip: JACKSONVILLE, FL 32223

Title: SEC  
Name: HOLCOMB, MAXINE  
Address: 2797 CARLENE COURT  
City-St-Zip: JACKSONVILLE, FL 32223

I hereby 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 all other like empowered.

SIGNATURE: DENISE WALLACE

RA

03/18/2011

Electronic Signature of Signing Officer or Director

Date