2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2009
Secretary of State

DOCUMENT# N95000001494

Entity Name: SIESTA ESTATES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

2477 STICKNEY PT RD
#118A
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2477 STICKNEY PT RD
#118A
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 65-0612046 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARGUS PROPERTY MANAGEMENT, INC.
2477 STICKNEY PT RD #118A
SARASOTA, FL 34242 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: P ( ) Delete
Name: ROGOS, ROGER
Address: 5574 SIESTA ESTATES CT
City-St-Zip: SARASOTA, FL 34242

Title: VD ( ) Delete
Name: DOBLE, VICKIE
Address: 5594 SIESTA ESTATES CT
City-St-Zip: SARASOTA, FL 34242

Title: T ( ) Delete
Name: MENEZES, FRANCO
Address: 5582 SIESTA ESTATES CT
City-St-Zip: SARASOTA, FL 34242

Title: D ( ) Delete
Name: WHITE, RAYMOND
Address: 5589 SIESTA ESTATES CT
City-St-Zip: SARASOTA, FL 34242

Title: D ( ) Delete
Name: MOONEY, JACK
Address: 1200 SIESTA BAYSIDE DR
City-St-Zip: SARASOTA, FL 34247

Title: AS ( ) Delete
Name: HAMMERLING, WALTER E
Address: 372 AVENIDA MADERA
City-St-Zip: SARASOTA, FL 34242

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:

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 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: ROGER ROGUS P 03/15/2009

Electronic Signature of Signing Officer or Director — Date