

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$81.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 27 1997 8:00am
Secretary of State

DOCUMENT # N96000001766 (2)

1. Corporation Name

THE SIESTA SAND DOLLARS, INC.

Principal Place of Business

Mailing Address

3451 QUEENS STREET
#618
SARASOTA FL 34231

3451 QUEENS STREET
#618
SARASOTA FL 34231

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/01/1996

3a. Date of Last Report

2. Principal Place of Business

21 SunTrust bank

2a. Mailing Address

26 SunTrust Bank

4. FEI Number

59-3385520

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 5035 Ocean Blvd

27 5035 Ocean Blvd

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23 Sarasota FL

28 Sarasota FL

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

24 34242

25 USA

Zip

Country

29 34242

30 USA

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RILEY, VICTORIA
3451 QUEENS STREET
#618
SARASOTA FL 34231

81 Name SunTrust Bank, Attn Andy Reeves

82 Street Address (P.O. Box Number is Not Acceptable)
5035 Ocean Blvd

83

84 City Sarasota FL 85 Zip Code 34242

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0504, Florida Statutes.

SIGNATURE ANDY REEVES

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME RILEY, VICTORIA
STREET ADDRESS 3451 QUEENS ST. #618
CITY-ST-ZIP SARASOTA FL 34231

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME 3057 MARKRIDGE ROAD
1.3 STREET ADDRESS Sarasota, FL 34231
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME VOGELIN, KEN
STREET ADDRESS 7457 CURTISS AVE.
CITY-ST-ZIP SARASOTA FL 34231

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME REEVES, ANDY
STREET ADDRESS 6530 SABAL DRIVE
CITY-ST-ZIP SARASOTA FL 34242

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE

NAME SANDERS, DEBRA
STREET ADDRESS 3451 QUEENS STREET #712
CITY-ST-ZIP SARASOTA FL 34231

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED BY REEVES

8/22/97

CR2E037 (4/97)