

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000093377

FILED
Jan 20, 2009
Secretary of State

Entity Name: SIESTA BREAKERS REALTY, INC.

Current Principal Place of Business:

6480 MIDNIGHT PASS RD.
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

6480 MIDNIGHT PASS RD.
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 65-1083351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLS, KEVIN T ESQ``
THE LAW OFFICES OF LOBECK, HANSON & WELLS
2033 MAIN ST., STE. 403
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HRABCAK, JOHN
Address: 6480 MIDNIGHT PASS RD #303
City-St-Zip: SARASOTA, FL 34242

Title: TS () Delete
Name: LA PLACE, BILL
Address: 6480 MIDNIGHT PASS RD. UNIT 402
City-St-Zip: SARASOTA, FL 34242

Title: AVP () Delete
Name: GREINER, ALBERT C
Address: 6021 MID NIGHT PASS ROAD
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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN HRABCAK

Electronic Signature of Signing Officer or Director

PRES

01/20/2009

Date