


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 21, 2005 08:00 AM
Secretary of State**

| | | |
|---|---|---|
| DOCUMENT # P03000018786 1. Entity Name SEASIDE RESORT RENTAL & MANAGEMENT, INC. | |  |
| Principal Place of Business 1715 STICKNEY POINT ROAD #C8 SARASOTA, FL 34231 | Mailing Address 1715 STICKNEY POINT ROAD #C8 SARASOTA, FL 34231 | |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent SAMS, LAURIE B ESQ. 2815 PROCTOR ROAD SARASOTA, FL 34231 | | DO NOT WRITE IN THIS SPACE |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____ | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D/ HURST, DIANA 1715 STICKNEY POINT ROAD #C8 SARASOTA, FL 34242 | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | |
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| 12. I 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | |
| SIGNATURE: <u>Diana Hurst</u> Diana Hurst | | 3-16-05 941 923 6077 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | <small>Date Daytime Phone #</small> |



03092005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 57-1151149 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

UD0000271547
03/21/05-80050-020 150.00

**DO NOT WRITE
IN THIS SPACE**