

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000102188

Entity Name: SISTI AND OTHERS, INC.

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

9059 MISTY CREEK DR.  
SARASOTA, FL 34241

## **New Principal Place of Business:**

8525 PARK SHORE LANE  
SARASOTA, FL 34238

## **Current Mailing Address:**

9059 MISTY CREEK DR.  
SARASOTA, FL 34241

## **New Mailing Address:**

8525 PARK SHORE LANE  
SARASOTA, FL 34238

FEI Number: 65-1207460

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SISTI, MICHAEL A  
9059 MISTY CREEK DR.  
SARASOTA, FL 34241 US

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

SISTI, MICHAEL A  
8525 PARK SHORE LANE  
SARASOTA, FL 34238 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:

03/27/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: VP  
Name: SISTI, MICHAEL A  
Address: 8525 PARK SHORE LANE  
City-St-Zip: SARASOTA, FL 34238 UN

Title: P  
Name: SISTI, SARA O  
Address: 8525 PARK SHORE LANE  
City-St-Zip: SARASOTA, FL 34238 UN

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

SIGNATURE: MICHAEL A. SISTI

VP

03/27/2012

Electronic Signature of Signing Officer or Director

Date