P050000046053

MCGERHAZA & Co				
(Requestor's Name)				
(Address) 14800 QUORUM DR				
14800 QUORUM DR (Address) Suite 310 DAIIASTEXAS 15254 (City/State/Zip/Phone #)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Enuty Name)				
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SECRETARY OF STATE

RA.

1B 1-5-11

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	SIESTA VISTA MANA	AGEMENT. INC.			
SUBJECT.	Name of Co				
DOCUMENT NUMBE	ER:P050	000046053			
The enclosed Statement	of Change of Registered Office	e/Agent and fee are subm	itted for filing.		
Please return all correspondence concerning this matter to the following:					
	REX W. MINTON				
Name of Contact Person					
Firm/Company					
	6300 MIDNIGHT PASS ROAD, #1002				
Address					
	SARASOTA, FL 34242 City/State and Zip Code				
City/State and Zip Code					
	rexminton@earthlink.net				
E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please ca	all:			
REX	W MINTON	at (972)	345-5624		
Name of	Contact Person	Area Code & Dayt	345-5624 ime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment Section	Street Address Amendment S	<u>L</u>		
	Division of Corporations	Division of Co			
	P.O. Box 6327	Clifton Buildi	ng		
	Tallahassee, FL 32314	2661 Executiv	e Center Circle		

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Floria ange is submitted for a corporation organized under the laws of the State of the change its registered office or registered agent, or both, in the State of	_{of_} Florida
1. The name of	the corporation: Siesta Vista Management, Inc.	
2. The principal Sarasota,	office address: 6300 Midnight Pass Road, #1002 FL 34242	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 03/28/2005 Document number:	P05000046053
	I street address of the current registered agent and registered office on file tment of State: (If resigned, enter resigned)	with the
	Richard S Webb c/o Icard, Merrill, et al	<u> </u>
	2033 Main Street, # 600	201 SI
	Sarasota, FL 34237 US	ZIII DEC 30 SECRETAR: TALLAHASS
6. The name and (if changed):	Sarasota, FL 34237 US I street address of the new registered agent (if changed) and /or registered agent (if changed) are registered agent (if chan	omografia
	Rex W. Minton	D 3: 40
	6300 Midnight Pass Road, # 1002 P.O. Box NOT acceptable	_ OF O
	Sarasota, FL 34242	
The street addre	ess of its registered office and the street address of the business office of be identical.	f its registered agent,
Such change wa authorized by the	is authorized by resolution duly adopted by its board of directors or by board, or the corporation has been notified in writing of the change.	an officer so
Signatur	Rex W. Minton, F	
I further agree to of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and confident with and accept the obligation of my position as registent of filed merely to reflect a change in the registered office address. I here been notified in writing of this change. Date Date	omplete performance red agent. Or, if this reby confirm that the
_	half of an entity:	
Ту	ped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *