

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90183 020 ***150.00

DOCUMENT# P93000052153		
1. EntityName SIENA HOME CORPORATION		

PrincipalPlaceofBusiness 2909 W STATE RD 434 SUITE 121-131 LONGWOOD, FL 32779 US	MailingAddress 2909 W STATE RD 434 SUITE 121-131 LONGWOOD, FL 32779 US
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2. PrincipalPlaceofBusiness 931 North State Road 434 Suite, Apt. #, etc. Suite 1201-348	3. MailingAddress 931 North State Road 434 Suite, Apt. #, etc. Suite 1201-348
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City&State Altamonte Springs, FL Zip 32714 Country US	City&State Altamonte Springs, FL Zip 32714 Country US
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6. NameandAddressofCurrentRegisteredAgent GOODMAN, BARRY S 2909 W STATE RD 434 SUITE 121-131 LONGWOOD, FL 32779	
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7. NameandAddressofNewRegisteredAgent Name Goodman, Barry S. StreetAddress (P.O. Box Number is Not Acceptable) 931 North State Road 434 Suite 1201-348 City Altamonte Springs FL Zip Code 32714	
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8. The abovenamed 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 obligation of registered agent.	
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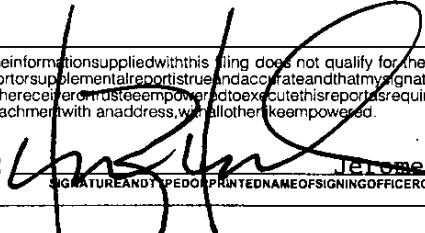
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent's signature is required when re-instating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GOODMAN, BARRY S 2909 W STATE ROAD 434, #121-131 LONGWOOD, FL 32779 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FREEDMAN, JERRY 2909 W STATE ROAD 434 #121-131 LONGWOOD, FL 32779 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KNOWLES, LISA A 2909 W STATE RD 434 STE 121-131 LONGWOOD, FL 32779 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUGHEY, JOANNE 2909 W STATE RD 434 STE 121-131 LONGWOOD, FL 32779 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Goodman, Barry S. 931 N. State Road 434, Suite 1201-348 Altamonte Springs, FL 32714 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Freedman, Jerome B. 931 N. State Road 434, Suite 1201-348 Altamonte Springs, FL 32714 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Knowles, Lisa A. 931 N. State Road 434, Suite 1201-348 Altamonte Springs, FL 32714 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Hughey, Joanne 931 N. State Road 434, Suite 1201-348 Altamonte Springs, FL 32714 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the registered agent; and that I am not a person who has been removed from the list of persons who are qualified to act as registered agents, or an attachment with an address, with all other fees empowered.	
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SIGNATURE: 	Jerome B. Freedman, President 4/10/06 407-786-4244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone#

40054555



04042006 Chg-P CR2E034(11/05)

4. FEINumber 59-3193130	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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