

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. McPherson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000032725 (0)

1. Corporation Name

SIESTA GULF VIEW VACATION RENTALS, INC.



Principal Place of Business

420 BEACH ROAD
SARASOTA FL 34242

Mailing Address

420 BEACH ROAD
SARASOTA FL 34242

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

KEITH, SANDRA
420 BEACH ROAD
SARASOTA FL 34242

3. Date Incorporated or Qualified

04/24/1995

3a. Date of Last Report

4. FFI Number

65-0574218

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0100 and 607.1608, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0100, Florida Statute.

SIGNATURE

Sandra Keith, Agent

Jan 25, 1996

12. OFFICERS AND DIRECTORS

TITLE	D	PROCASSINI, CARMINE	☐ DELETE
NAME		175 HARTSHORE ROAD	
STREET ADDRESS		LOCUST NJ 07760	
CITY-STATE-ZIP			
TITLE	D	CORSETT, GEORGE	☐ DELETE
NAME		819 WOODLAND AVENUE	
STREET ADDRESS		OAKMONT PA 15139	
CITY-STATE-ZIP			
TITLE	D	KEITH, SANDRA	☐ DELETE
NAME		320 BAY VISTA AVENUE	
STREET ADDRESS		OSPREY FL 34229	
CITY-STATE-ZIP			
TITLE	D	MASTER, DANIEL	☐ DELETE
NAME		135 CIRCLE ROAD	
STREET ADDRESS		STATON ISLAND NY 10304	
CITY-STATE-ZIP			
TITLE	D	JOHEM, GUS	☐ DELETE
NAME		4525 LONGPORT ROAD	
STREET ADDRESS		COLUMBUS OH 43220	
CITY-STATE-ZIP			
TITLE	D	KOCH, WILLIAM	☐ DELETE
NAME		15 BRITTANY PLACE	
STREET ADDRESS		BASKING RIDGE NJ 07920	
CITY-STATE-ZIP			

13.

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	☐ Change ☐ Addition
15 TITLE	
16 NAME	
17 STREET ADDRESS	
18 CITY-STATE-ZIP	☐ Change ☐ Addition
19 TITLE	
20 NAME	
21 STREET ADDRESS	
22 CITY-STATE-ZIP	☐ Change ☐ Addition
23 TITLE	
24 NAME	
25 STREET ADDRESS	
26 CITY-STATE-ZIP	☐ Change ☐ Addition
27 TITLE	
28 NAME	
29 STREET ADDRESS	
30 CITY-STATE-ZIP	☐ Change ☐ Addition
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	☐ Change ☐ Addition
35 TITLE	
36 NAME	
37 STREET ADDRESS	
38 CITY-STATE-ZIP	☐ Change ☐ Addition
39 TITLE	
40 NAME	
41 STREET ADDRESS	
42 CITY-STATE-ZIP	☐ Change ☐ Addition

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***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sandra Keith

1/26/96

Jan 25, 1996

CR2E034 (12/95)