FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P95000034614 (4)

SIESTA HARBOR REALTY CORPORATION

FILED May 11 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				T TOOTION IN INDIA COINT GOINT BOUT DON'T STIED INTER RIES OLDS CHARL DIES TOOF
6289 MIDNIGHT PASS ROAD Sarasota Fl 34242		6289 MIDNIGHT PASS ROAD SARASOTA FL 34242				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						04/25/1995
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0578137 Not Applicable
Sulte, Apt.	#, et c.	Suite, Apt. #. etc.				5. Certificate of Status Desired \$8.75 Additional
City & State		City & State				Fee Required
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zφ	Cou	Country		This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔲 Yes 🔀 No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent
DEUNEN & PULIANUPP P.A.				81	Name	
				82 Street Addre		Address (P.O. Box Number is Not Acceptable)
SA	RA 8 0TA FL 34236					
				83		
			1	84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statuti	es, the at	oove-	named o	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 obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	☐ DELETE 1.1 TIT			Change Addition
NAME	LARMER, RICHARD J		1.2 NAME			
STREET ADDRESS	1250 NO. PORTOFINO DRIVE		1.3 STREET ADDRESS		DDRESS	ļ.
CITY-ST-ZIP				TY-ST	ZIP	
TITLE	•	-		2.1 TITLE		Change Addition
NAME	YATES, JIMMIE		2.2 NA			1215 SO. PORTOFINODRIVE
STREET ADDRESS	1215 SO. PORTOFINGI DRIVE		2.3 STREET ADDRESS 2. 4 CITY - S1 - ZIP		- 1	12013 OF 1 OF 1 1 OF 1
CITY-ST-ZIP TITLE	SAMASUIA PL 34242				-71P +	Change Addition
NAME		_ otter		3.1 TITLE 3.2 NAME		C Autorition
STREET ADDRESS					DDRESS	
CITY-ST-ZIP			- 1	ITY-ST		
TITLE		DELETE	4.1 10		<u> </u>	Change Addition
NAME			4. 2 N/	AME		
STREET ADDRESS			4.3 ST	REET A	DORESS	
CITY - ST - ZIP			4.4 Ci1	TY-ST-	ZIP	
TITLE		DELETE	5.1 TIT	ΓLE		☐ Change ☐ Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 ST	REET A	DDRESS	
CITY-ST-ZIP				TY-\$1-	ZIP	
TITLE		☐ DELETE	6.1 TH	TLF	[Change Addition
NAME			6.2 NA	ME		1
STREET ADDRESS			6.3 ST	reet a	DORESS	
CITY-ST-20P			6.4 CI	TY - ST-	ZIP	

4. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CICNIATUDE.

1-27-98 (94) 349-2949