

2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000047118

FILED
May 23, 2011
Secretary of State

Entity Name: SIESTA POINTE APARTMENTS, INC.

Current Principal Place of Business:

490 OPA LOCKA BLVD
SUITE 20
OPA LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

490 OPA LOCKA BLVD
SUITE 20
OPA LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 65-0846791 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WILLIAMS-BALDWIN, STEPHANIE SVP
490 OPA-LOCKA BOULEVARD
OPA-LOCKA, FL 33054 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT
Name: FUNEUS, FRED
Address: 1320 NW 62ND STREET
City-St-Zip: MIAMI, FL 33142 US

Title: SD
Name: BROWN, MARY
Address: 2444 NW 135TH STREET
City-St-Zip: OPA-LOCKA, FL 33054

Title: C
Name: PEMBERTON, DAVE
Address: 1200 SW 124TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D
Name: LOGAN, WILLIE F
Address: 490 OPALOCKA BLVD., #20
City-St-Zip: OPA LOCKA, FL 33054

Title: VC
Name: HOLLOWAY, WILBERT T
Address: 6231 NW 201 STREET
City-St-Zip: MIAMI, FL 33055

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: STEPHANIE WILLIAMS BALDWIN

SVP

05/23/2011

Electronic Signature of Signing Officer or Director

Date