

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701816

Entity Name: SIESTA ROYALE APARTMENTS, INC.

Current Principal Place of Business:

6334 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

Current Mailing Address:

6334 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

FEI Number: 59-0918948

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANDEFER, KENNETH FCPA
2262 GULF GATE DR.
SARASOTA, FL 34231 US

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

Officer/Director Detail :

Title 1VPD
Name WATKINS, HARRY
Address 204 FRANKLIN ST
City-State-Zip: UHRICHSVILLE OH 44683

Title PRESIDENT
Name GRESCOVIAK, LARRY
Address 5337 QUAAS DRIVE
City-State-Zip: WEST BEND WI 53095

Title SECRETARY
Name FERRARIS, FRANZ
Address 111 SPRING ST., ALMONTE
City-State-Zip: ONTARIO KOA 1-AO

Title TREASURER
Name TERWILLIGER, CARL
Address 11499 CARR RD
City-State-Zip: DAVISON MI 48423

Title MEMBER
Name POCIASK, STEVE
Address P.O. BOX 143
City-State-Zip: AALEXANDRIA SD 57331

Title MEMBER
Name SHERIDAN, FRAN
Address 7 RATLIN RD
City-State-Zip: MARBLEHEAD MA 01945-2210

Title 2ND VICE PRESIDENT
Name HAYES, JOE
Address 329 NORTSHORE DRIVE
City-State-Zip: COLDWATER MI 49038

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARL TERWILLIGER

TREASURER

05/26/2020

Electronic Signature of Signing Officer/Director Detail

Date