2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731710

FILED Feb 07, 2007 Secretary of State

Entity Name: VIZCAYA GARDENS CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 711 S.E. 1ST WAY DEERFIELD BEACH, FL 33441 US **Current Mailing Address: New Mailing Address:** 6683 WEST BOYNTON BEACH BLVD. 6849 COBIA CIRCLE BOYNTON BEACH, FL 33437 US SUITE 200 BOYNTON BEACH, FL 33437 US FEI Number: 59-1845782 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KENNELLY, JOHN S ESQ KENNELLY, JOHN S ESQ 6849 COBIÁ CIRCLE 6683 WEST BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33437 US SUITE 200 BOYNTON BEACH, FL 33437 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: 02/07/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete RUSCITTI, FRANK Name: Name: 721 SE 1ST WAY, UNIT 9 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip: Title: PD Title: PD (X) Change () Addition () Delete Name: KENNELLY, JOHN SR Name: KENNELLY, JOHN SR Address: 333 KEY PALM RD Address: 6683 WEST BOYNTON BEACH BLVD, STE, 200 City-St-Zip: BOCA RATON, FL City-St-Zip: BOYNTON BEACH, FL 33437 Title: () Delete Title: () Change () Addition WEISS, BRUCE Name: Name: Address: 721 SE 1ST WAY UNIT 13 Address: City-St-Zip: DEERFIELD BEACH, FL 33441 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHN B. KENNELLY PD 02/07/2007