

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90054 017 \*\*\*\*61.25



**DOCUMENT # 753465**

1. Entity Name

VISTA BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

19111 VISTA BAY DRIVE  
INDIAN SHORES FL 33785

Mailing Address

19111 VISTA BAY DR  
MANAGER'S OFFICE  
INDIANSHORES FL 33785  
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2446132

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBINSON, JOAN E  
19111 VISTA BAY DRIVE  
SUITE 608  
INDIAN SHORES FL 33785

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Joan Robinson, Treasurer*  
**JOAN E. ROBINSON**

(NOTE: Registered Agent signature required when reinstating)

DATE

*6 April 2007*

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
D	SKIDGELL, PAULETTE	18111 VISTA BAY DR 201	INDIAN ROCKS BEACH FL 33785	<input type="checkbox"/>
T	ROBINSON, JOAN	19111 VISTA BAY DR #608	INDIAN SHORES FL 33785	<input type="checkbox"/>
SD	GRAS, JUDITH	19111 VISTA BAY DRIVE #210	INDIAN SHORES FL 33785	<input type="checkbox"/>
VD	SARNESE, JOHN	19111 VISTA BAY DR 207	INDIAN SHORES FL 33785	<input type="checkbox"/>
D	CREEDON, ROBERT	19111 VISTA BAY DR #507	INDIAN SHORES FL 33785	<input type="checkbox"/>
D	WOOD, ROBERT	19111 VISTA BAY DR #611	INDIAN SHORES FL 33785	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
P	JOSEPH E BARTUS	19111 VISTA BAY DR #310	INDIAN SHORES FL 33785	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	PAULETTE SKIDGELL	19111 VISTA BAY DR #201	INDIAN SHORES, FL 33785	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X*

*Joan Robinson, JOAN E. ROBINSON, TREASURER*

Date

Daytime Phone #

*6 April 2007 727-517-9004*