

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763112

FILED
Apr 27, 2009
Secretary of State

Entity Name: VISTA HILLS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5690 WESTVIEW DRIVE
ORLANDO, FL 32810 US

New Principal Place of Business:

5507 WESTVIEW DRIVE
ORLANDO, FL 32810 US

Current Mailing Address:

PO BOX 767
CLARCONA, FL 32710 US

New Mailing Address:

FEI Number: 59-2746871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, DAVID
5507 WESTVIEW DR.
ORLANDO, FL 32810 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: T () Delete
Name: PRESELY, FELICIA
Address: 5690 WESTVIEW DRIVE
City-St-Zip: ORLANDO, FL 32810 US

Title: P () Delete
Name: JOHNSON, DAVID
Address: 5507 WESTVIEW DR
City-St-Zip: ORLANDO, FL 32810

Title: VP () Delete
Name: PEREZ, HECTOR
Address: 5511 LONG LAKE
City-St-Zip: ORLANDO, FL 32810

Title: D () Delete
Name: PRESELY, DALE
Address: 5690 WESTVIEW DRIVE
City-St-Zip: ORLANDO, FL 32810 US

Title: S (X) Delete
Name: JOHNSON, MARSHA
Address: 5507 WESTVIEW DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: D (X) Delete
Name: COOK, MYRTA
Address: 6203 RANIER DR
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, DAVID
Address: 5507 WESTVIEW DRIVE
City-St-Zip: ORLANDO, FL 32810 US

Title: T (X) Change () Addition
Name: PRESELY, FELICIA
Address: 5690 WESTVIEW DR
City-St-Zip: ORLANDO, FL 32810

Title: VP (X) Change () Addition
Name: COOK, MYRTA
Address: 6203 RANIER DRIVE
City-St-Zip: ORLANDO, FL 32810

Title: SEC (X) Change () Addition
Name: JOHNSON, MARSHA
Address: 5507 WESTVIEW DRIVE
City-St-Zip: ORLANDO, FL 32810 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DAVID JOHNSON

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date