## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT #765944**

1. Entity Name



**FILED** May 02, 2005 8:00 am Secretary of State 05-02-2005 90494 005 \*\*\*\*61.25

		ASSOCIATION, INC.		/			
Principal Place of Business 2125 WINDWARD WAY VERO BCH, FL 32963		Mailing Address C/O VISTA PROPERTIES MANAGEMENT, INC. 100 VISTA ROYALE BLVD. VERO BEACH, FL 32963 US		1 10 0 11 11 11 11 11 11		14 ALSK 2100 A10K	101 11 101
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01052005 Chg	g-NP CR2E03	37 (10/03)	
City & State		City & State		4. FEI Number			
Zip	Country	Zip	Country	5. Certificate of Sta	tus Desired	\$8.75 Addi	
	6. Name and Address of Current R	egistered Agent		7. Name and Addr	ess of New Registered	Agent	
LEVONE	AV C	-	Name				
LEVINE, JAY S 2500 N. MILITARY TRAIL SUITE 490			Street Address		lot Acceptable)		
	7 TON, FL 33431		-				
	•		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 according the obligations of registered agent.							and accept
•							
SIGNATURE .	Signature, typed or printed name of registered agent ar	d litte if applicable. (NOTE: Re	gistered Agent signature requi	red when reinstating)	DATE		
Filing Fee is \$61.25 Due by May 1, 2005		9 Election Campa	9. Election Campaign Financing Trust Fund Contribution.		Nata abaa	le novebbe te	
	•			\$5.00 May Be Added to Fees	Make chec Florida Depa		
10.	•	Trust Fund Con				rtment of St	ate
10.	Due by May 1, 2005	Trust Fund Con	tribution.		Florida Depa	rtment of St	ate
TITLE NAME	OFFICERS AND DIRECTOR	Trust Fund Con	TILE NAME		Florida Depa	rtment of St	ate 10
TITLE NAME STREET ADDRESS	OFFICERS AND DIRE PD GARVEY, TOM 2250 SOUTHWINDS BLVD. #326	Trust Fund Con	TILE NAME STREET ADDRESS		Florida Depa	rtment of St	ate 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD GARVEY, TOM 2250 SOUTHWINDS BLVD. #326 VERO BEACH, FL 32963	Trust Fund Con	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGE	Florida Depai	rtment of St IRECTORS IN Change	ate 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Due by May 1, 2005  OFFICERS AND DIRE  PD GARVEY, TOM 2250 SOUTHWINDS BLVD. #326  VERO BEACH, FL 32963  D WEST, JOHN 2250 W. SOUTHWINDS BLVD., #	Trust Fund Con	11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D NAME STREET ADDRESS J STREET ADDRESS	ADDITIONS/CHANGE	Florida Depai	rtment of St IRECTORS IN Change	10 Addition
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 approas 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 officers, with all other than employed.

SIGNATURE: