2008 NOT-FOR-PROFIT CORPORATION

FILED Jan 24, 2008 8:00 am Secretary of State

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ANNUAL REPORT	
ANNUAL KEPUKI	

DOCUMENT # N0500001845 1. Entity Name VISTA TRACE 2 CONDOMINIUM ASSOCIATION, INC.						01-24-2008 90036 021 ****61.25						
Principal Place of Business 2121 PONCE DE LENO BLVD., PH CORAL GABLES, FL 33134			2121	Mailing Address 2121 PONCE DE LENO BLVD., PH CORAL GABLES, FL 33134								
Principal Place of Business - No P.O. Box # Mailing Address												
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01022008 Cr	ng-NP	CR2E037 (12/06)				
City & State			City & State					4. FEI Number 20-408537	9			olied For Applicable
Zip		Country	Zip	<u>-</u>	Cou	intry		5. Certificate of St		Fee	.75 Add Required	
	6. Name	and Address of Current	Registere	d Agent		No.		7. Name and Add			nt	
REGISTER	ED AGEN	NTS OF FLORIDA I	LC			Name CARIOS TRIAY, P.A.						
REGISTERED AGENTS OF FLORIDA, LLC 100 SOUTHEAST SECOND STREET, SUITE 2900 MIAMI, FL 33131-2130					Street Address (P.O. Box Number is Not Acceptable)							
						3	750	NW 87	AUE =	#100		
						City						
		y submits this statement for	or the purp	ose of changing its	registere	ed office or	register	red agent, or both, in	the State of Flori	da. I am fami	liar with,	and accept
the obligations of registered agent.												
SIGNATURE s	ignature, typed	or printed name of registered agent	and title app	licable. (NOTI	E: Registere	d Agent signatu	re required	when reinstating)		DATE		
	_	e is \$61.25 lay 1, 2008		9. Election Car Trust Fund (_		\$5.00 May Be Added to Fees		ke check pa a Departme		
10.		OFFICERS AND DI	RECTORS		11.			ADDITIONS/CHANG	ES TO OFFICERS	AND DIREC	TORS IN	10
TITLE	PD			Delete	TITLE	E	PD			×	Change	Addition
	ADAMS, BRUCE NAM				NAM	_	YV	ette G	. VAld	2		
	•					et address - St- Zip	9.8	927 S. Comestead	oixie Hw	1		
	VPD	ABLES, FL 33134		Delete			_H	mestead	FI 330	<u>535</u>	Change	☐ Addition
,	SHANNO	N. KARR		Delete	TITLE		30	ChARA I	Siaz ,		Change	Addition
STREET ADDRESS	2121 PON	ICE DE LEON BLVD.,	PH		STRE	ET ADDRESS	150	RDARA I	84 54 #	2101		
CITY-ST-ZIP	CORAL G	ABLES, FL 33134	••		CITY	- ST- ZiP	H'	MESTEA	3, FI			
	STD	FDO 1/114		Delete	TITLI		TD		ومسا	, ,	Change	Addition
		ERG, KIM ICE DE LEON BLVD.,	PН		NAM STRE	ET ADDRESS	Pa	UI SCHUH	184 ST	#2303	3	
		ABLES, FL 33134				-ST-ZIP	Har	nestead,	ED.			
TITLE				☐ Delete	TITLE	E	,	, <u>, , , , , , , , , , , , , , , , , , </u>			Change	Addition
NAME					NAM	1						
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS '-ST-ZIP						
TITLE				☐ Delete	TITLE						Change	Addition
NAME				La Delicia	NAM						, change	Д.
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP					CITY	-ST-ZIP						
TITLE				☐ Delete	TITE					<u></u>) Change	Addition
NAME STREET ADDRESS					NAM STRE	eet adoress						
CiTY-ST-ZIP						-ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.												