FILE NOW: FILING FEE IS \$61.25

FILED NONPROFIT Apr 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # N20437 (2) VISTA VERDE WEST CONDOMINIUM ASSOCIATION. INC. Principal Place of Business Mailing Address 8053 BAHIA DEL MAR CIR * RESOURCE PROP MGMT 3. Date Incorporated or Qualified ST PETERSBURG FL 33715 140 DINCHAS RAYWAY 05/01/1987 TIERRA VERDE FL 33715 4. FEI Number Applied For 59-2951448 Not Applicable 2a. Mailing Address 28 //8 Pine/ 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 21 Fee Required Suite, Apt. #, etc. Suite. Apt. #. etc. \$5.00 May Be Election Campaign Financing 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes □ No 23 28 Zip Country Zip Country 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ALLEN, LINDA 82 Street Address (P.O. Box Number is Not Acceptable) %RESOURCE PROPERTY MANAGEMENT 83 118 PINELLAS BAYWAY TIERRA VERDE FL 33715 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE SHELL, JOHN John Shell MALAG 1.2 NAME 6100 BAHIA DEL MOT CR. #201 -8100 BAHKA DEL MAR OIR., 3201-STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE Mike Logue KONOBY, RAY 2.2 NAME NAME 6050 BAHYA Del Mar CR. #117 5900 BAHIA DEL MAR CIR., #139 2.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 2. 4 CITY-ST-ZIP CITY - ST - ZIP DEL ETE TITLE 31 TITLE Frank DAVIS DAVIS, FRANK NAME 3.2 NAME BAHIA Del Mar CR #207 6100 BAHKA DEL MAR CIR, UNIT 207 6100 STREET ADDRESS 3.3 STREET ADDRESS ST PETERSBURG FL CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE WARNER, ADRIAN Dale Butters NAME 4. 2 NAME Bahia Del Mar Ce. # 140 STREET ADDRESS 4231 HOLLAND DR. 4.3 STREET ADDRESS ST PETERSBURG FL CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE Addition 5.1 TITLE COHEN, MORRIS NAME 5.2 NAME STREET ADDRESS 6000 BAHIA DEL MAR CIR, 129 5.3 STREET ADDRESS ST PETERSBURG FL CITY-ST-ZIP 5.4 CITY - ST - ZIP Change Addition DELETE TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or or an adachment with an address. SIGNATURE:

STREET ADDRESS