2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State
04-25-2005 90312 035 ****61.25

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DOCUMENT # N20437

1. Entity Name
VISTA VERDE WEST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6053 BAHIA DEL MAR CIR ST PETERSBURG, FL 33715 US	5901 SW BLVD # 200 ST PETERSBURG, FL 33715 US

02212005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
6350 Bahia Del Mar Cir.	5901 Sun Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc. 200
City & State: St. Petersburg FL	City & State: St. Petersburg FL
Zip: 33715 Country: US	Zip: 33715 Country: US

4. FEI Number 59-2951448 ☐ 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
WAYDA, CHRISTINE C/O RESOURCE PROPERTY MGMT. 5901 SW BLVD # 200 ST PETERSBURG, FL 33715	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 Christine Wayda 3/9/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP SRISCOLL, JAMES 6050 BAHIA DEL YHAR CIR #118 SAINT PETERSBURG, FL 33715	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Driscoll, James 6050 Bahia Del mar Cir #118 St. Petersburg FL 33715	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STROM, JEAN 6100 BAHIA DEL MAR CIR #101 ST PETERSBURG, FL 33715	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Rossburg, Charles 6000 Bahia Del Mar Cir. #132 St. Petersburg FL 33715	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP LOGUE, MIKE 6050 BAHIA DEL MAR CIR #117 SAINT PETERSBURG, FL 33715	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HAFFERMAN, DOLORES 6020 BAHIA DEL MAR CIR .#125 SAINT PETERSBURG, FL 33715	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOLAN, THOMAS 5900 BAHIA DEL MAR CIR #135 SAINT PETERSBURG, FL 33715	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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: [signature] 4/14/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #