

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # N93000002765

VIZCAYA VILLAS HOMEOWNERS' ASSOCIATION, INC.

7200 GRIFFIN RD 26

Principal Place of Business 101\_N.W. 72ND AVENUE PLANTATION FL 33317

2. Principal Place of Business

Mailing Address

P.O. BOX 17437 PLANTATION FL 33318

2a. Mailing Address

Suite, Apt. #, etc.

## FILED May 04, 1999 8:00 am § Secretary of State

05-04-1999 90199 041 \*\*\*\*61.25



3. Date Incorporated or Qualifed

06/07/1993

65-0508823

4. FEI Number

City & State	DVIP FL 28			5. Certificate of Status Desired Fee Required	
Zip Country Zip Country			у	6. Election Campaign Financing S5.00 May Be	
24 33/4 25 29 30				Trust Fund Contribution Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
		8	1 Name	•	
MCARDLE, GEORGE E			Stree	t Address (P.O. Box Number is Not Acceptable)	
TOTI N.W. 72ND AVENUE			82 Street Address (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33317			3 ′	1. 1. D. B	
PEARIAII	ON 1 E 30017	_	4 0"	SW7C 5 2ip Code	
		84		17/10 FL 333/4	
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 title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE					
12.	OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
गार⊑	D DELETE	1.1 TITLE		Change Addition	
NAME	FEINSTEIN, ERIC	1.2 NAME		( 1=5' D) 3.0	
STREET ADDRESS	101 N.W. 72ND AVENUE	1.3 STRE	ET ADORES		
CITY-ST-ZIP	PLANTATION FL 33317	1.4 CITY-	ST-ZIP	DAVIE FC 33314	
TITLE	D DELETE	21 TITLE		Change Addition	
NAME	BARR, JOHN E	2.2 NAME		- 6-1CC   Ph 3-R	
STREET ADDRESS	101-N.W.: 72ND AVENUE	2.3 STRE	ET ADDRES	DAVIE FL 33314  Change - Addition	
CITY-ST-ZIP	PLANTATION FL 33317	2. 4 CITY	ST-ZIP	DAVIE 12 33314	
TITLE	D CELETE	3.1 TITLE		Change —— [=] Addition	
NAME	MCARDLE, GEORGE E	3.2 NAME	:	- a a riffin RD 3-B	
STREET ADDRESS	1 <del>01 N.W. 72ND AVENUE</del>	3.3 STRE	ET ADDRES	7200 GriffINRD 3-B	
CITY-ST-ZIP	PLANTATION-FL-33317	3.4. CITY	ST-ZIP	PAVIE TO STATE Addition	
TITLE	☐ DELETE	4.1 TITLE		Change Li Addison	
NAME		4. 2 NAM	E		
STREET ADDRESS		4.3 STRE	ET ADDRES	3	
CITY-ST-ZIP		4.4 CITY-	ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME		5.2 NAME			
STREET ADDRESS			ET ADDRES	3	
CITY-ST-ZIP		5.4 CITY-		TO Addition	
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME		6.2 NAME			
STREET ADDRESS			ET ADDRES	5	
CITY-ST-ZIP		6.4 CITY-		Lis Capital 440 07(0)(1) Florido Capitals - 15 short and its that the information	
14. I hereby of	certify that the information supplied with this filing does not qualify for the	exemp	otion stat	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information	

what my signature snail have the same legal effect as if made under oath; that I am all fils report as required by Chapter 617, Florida Statutes; and that my name appears in ike empowered. indicated on this annual report or supplemer officer or director of the corporation or the re Block 12 or Block 13 if changed, or on an at

SIGNATURE:

Applied For

Not Applicable