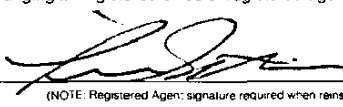
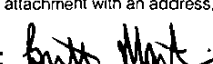


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90031 044 ****61.25

DOCUMENT # N93000002765 1. Entity Name VIZCAYA VILLAS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business PM PROPERTY MGMT 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912			Mailing Address PM PROPERTY MGMT 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912		
2. Principal Place of Business - No P.O. Box # Innovative Property Mgmt. 1, Corp. 1532 Jackson Street Fort Myers, FL 33901		3. Mailing Address Innovative Property Mgmt. 1, Corp. 1532 Jackson Street Fort Myers, FL 33901			
City & State Fort Myers, FL 33901		City & State Fort Myers, FL 33901		4. FEI Number 65-0508823	
Zip 33901		Country US		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAPP, PAUL L P & M PROPERTY MANAGEMENT, INC. 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912			7. Name and Address of New Registered Agent Name: Linda S. Baxter Street Address (P.O. Box Number is Not Acceptable): 1532 Jackson Street City: Fort Myers FL 33901		
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 LINDA S. BAXTER  1-22-08 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, 2008			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	P ISTIN, JEROME 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Jerome Istin 3821-5 Schoolhouse Rd. E. Fort Myers, FL 33916	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ACUTI, ANTHONY 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D Anthony Acuti 3829-5 Schoolhouse Rd. E. Fort Myers, FL 33916	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TERRELL, JOANNE 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Joanne Terrell 3833-1 Schoolhouse Rd. E. Fort Myers, FL 33916	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENJAMIN, CHRIS 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Chris Benjamin 3821-1 Schoolhouse Rd. E. Fort Myers, FL 33916	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, BRETT 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Brett Martin 3825-1 Schoolhouse Rd. E. Fort Myers, FL 33916	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS RANDALL, DIVELEY 14360 S TAMiami TRAIL #B FORT MYERS, FL 33912	☒ 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 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.					
SIGNATURE:  Brett Martin			1/22/08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		