

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 30, 2009**  
**Secretary of State**

DOCUMENT# N98000005993

**Entity Name:** VISTA DEL LAGO I CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2150 WEST 68 ST SUITE # 205  
HIALEAH, FL 33016**New Principal Place of Business:****Current Mailing Address:**PO BOX 160310  
HIALEAH, FL 33016**New Mailing Address:****FEI Number:** 65-0855922**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MAGALY, ALVAREZ  
9917 W. OKEECHOBEE RD. #4-412  
HIALEAH, FL 33016 US**Name and Address of New Registered Agent:**NEIGHBORHOOD PROP. MGMT  
2150 WEST 68 ST #205  
HIALEAH, FL 33016 US

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.

SIGNATURE: /AGUSTIN CABRERA/

10/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ALVAREZ, MAGALY  
Address: 9917 W. OKEECHOBEE RD # 4-412  
City-St-Zip: HIALEAH, FL 33016

Title: TD ( ) Delete  
Name: DIAZ, PABLO  
Address: 9915 W. OKEECHOBEE RD. #5-204  
City-St-Zip: HIALEAH, FL 33016

Title: SD ( ) Delete  
Name: DIAZ, DRUCILA  
Address: 9911 W. OKEECHOBEE RD. #6-502  
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete  
Name: NADER, SANDRA  
Address: 9917 W. OKEECHOBEE RD # 4-404  
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete  
Name: ROSAL, LUIS A  
Address: 9915 W. OKEECHOBEE RD # 5-206  
City-St-Zip: HIALEAH, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: /MAGALY ALAVAREZ/

PD

10/30/2009

Electronic Signature of Signing Officer or Director

Date