2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# P03000084455

Entity Name: VISTA HILL HOLDINGS, INC.

Current Principal Place of Business:

1201 W. SWANN AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

1201 W. SWANN AVENUE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 20-0189193 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HANEY, REID
101 EAST KENNEDY BLVD., STE. 3700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PORTELLI, ANDREW
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete
Name: ADAMS, GLENN C
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete
Name: DEWHURST, DONALD
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete
Name: DVORKIN, RONALD
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete
Name: BREEN, JOHN P
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: O ( ) Delete
Name: ERVAST, DONNA L COO
Address: 1201 SWANN AVE
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change ( ) Addition
Name: PORTELLI, ANDREW
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

Title: D/VP (X) Change ( ) Addition
Name: ADAMS, GLENN C
Address: 1201 W SWANN AVE
City-St-Zip: TAMPA, FL 33606

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: S/T (X) Change ( ) Addition
Name: ERVAST, DONNA L COO
Address: 1201 SWANN AVE
City-St-Zip: TAMPA, FL 33606

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA L.ERVAST S 04/02/2009

Electronic Signature of Signing Officer or Director Date