

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714380

**Entity Name:** VISTA HERMOSA ASSOCIATION, INC.

**Current Principal Place of Business:**

6725 MIDNIGHT PASS ROAD  
SARASOTA, FL 34242

**Current Mailing Address:**

ARGUS PROPERTY MGMT., INC  
2477 STICKNEY POINT RD 118A  
SARASOTA, FL 34231

**FEI Number:** 59-1288720

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARGUS PROPERTY MANAGMENT  
ARGUS PROPERTY MGMT., INC  
2477 STICKNEY POINT RD STE 118A  
SARASOTA, FL 34231 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PAPLOWSKI, EVONA  
Address        6725 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

Title            VP  
Name            CHROSTOWSKI, CATE  
Address        6725 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

Title            TREASURER  
Name            BARRY, THOMAS  
Address        6725 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

Title            SECRETARY  
Name            FRANKS, ELLEN  
Address        6725 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

Title            DIRECTOR  
Name            MCNALLY, GINGER  
Address        6725 MIDNIGHT PASS ROAD  
City-State-Zip: SARASOTA FL 34242

*I hereby 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 all other like empowered.*

**SIGNATURE:** EVONA PAPLOWSKI

**PRESIDENT**

**03/08/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date