

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000001999

**Entity Name:** VISTA ROYALE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7649 MOUNT CARMEL DR  
ORLANDO, FL 32835

**Current Mailing Address:**

385 DOUGLAS AVE.  
3000  
ALTAMONTE SPRINGS, FL 32814

**FEI Number:** 59-3215311

**Certificate of Status Desired:** No

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

LARSEN & ASSOCIATES, P.A  
300 S ORANGE AVE  
1200  
ORLANDO, FL 32801 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 PD  
Name LEVENE, CAROLE  
Address C/O THE CONTINENTAL GROUP, INC.  
385 DOUGLAS AVE. STE. 3000  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title VPD  
Name MUENKS, BARBARA  
Address C/O THE CONTINENTAL GROUP, INC.  
385 DOUGLAS AVE. STE. 3000  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title D  
Name HAVEN, JOLYNN  
Address C/O THE CONTINENTAL GROUP, INC.  
385 DOUGLAS AVE. STE. 3000  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

*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:** LEVENE , CAROLE

**PRESIDENT**

**01/25/2013**

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

\_\_\_\_\_  
Date