2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

1. Entity Nam	MENT # 707258 RBOR VISTA, INC.					02-25-2008	90036 0	09 ****61	1.25
Principal Place 1700 JAMAIC PUNTA GORD		Mailing Address P.O. BOX 510463 PUNTA GORDA, FL 3							
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address							
Suite. Apt. #, etc.		Suite, Apt. #, etc.			02132008	Chg-NP	CR2E0	37 (12/06)	
City & State		City & State			4. FEI Number 59-1566			_ 	oplied For ot Applicable
Zìp	Country	Zip	Cor	intry	5. Certificate of	of Status Desired		\$8.75 Add Fee Require	
	6. Name and Address of Curren	Registered Agent			7. Name and	Address of New I	Registered .	Agent	
STAR HOS	SPITALITY MGMT			Name					
	OR RD, # 1		Street Address			r is Not Acceptab	le)		
PUNTA GO	DRDA, FL 33950			<u> </u>					 -
;	. ·		City				FL	Zip Code	ė
9 The above	named entity submits this statement f	or the purpose of changing	ito rogiotor	ad effice or register	rad spant or both	in the State of El		familiar with	and accept
	ions of registered agent.	or the purpose of Changing	its register	ed Office of Teglister	red agent, or both	i, in the state of th	onda. Tam	rearrance with,	and accept
SIGNATURE .	** * Signature, typed or printed name of registered ager	A and tale described	OTF: D ======	d Agent signature requirer	d		DATE		<u>-</u> _
	if	t and the rappecable. (N	OTE. Negisiere	a Agent signatore required	u witch i ton istatikigi		DAIL		
	*.								
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election C Trust Fund	ampaign F d Contribut		\$5.00 May Be Added to Fees			k payable to rtmen: of Si	
10.	Due by May 1, 2008 OFFICERS AND D	Trust Fund		ion.	Added to Fees		rida Depai	rtmen of Si	tate
10.	OFFICERS AND D	Trust Fund	d Contribut	ion.	Added to Fees	Flo	rida Depai	rtmen of Si	tate
TITLE NAME	OFFICERS AND D OFFICERS AND D ARTHER, WILLIAM	Trust Fund	d Contribut 11. TITL NAM	ion.	Added to Fees	Flo	rida Depai	RECTORS IN	tate
TITLE NAME STREET ADDRESS	OFFICERS AND D OFFICERS AND D ARTHER, WILLIAM 1318 CASEY DR	Trust Fund	d Contribut 11. TITL NAM STRE	E EET ADDRESS	Added to Fees	Flo	rida Depai	RECTORS IN	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND D OFFICERS AND D OVP ARTHER, WILLIAM 1318 CASEY DR PUNTA GORDA, FL 33950 P	Trust Fund	d Contribut 11. TITL NAM STRE CITY TITL	E E E E E E E E E E E E E E E E E E E	Added to Fees	Flo	rida Depai	RECTORS IN	tate
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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

2-18-08-Date Phon