

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729782

FILED
Feb 19, 2007
Secretary of State

Entity Name: COSTA VISTA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

FOUR 163RD AVE E.
REDINGTON BEACH, FL 33708 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 8125
MADEIRA BEACH, FL 337388125

New Mailing Address:

FEI Number: 59-3383005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERIKA M LYNCH
THREE 163RD AVE E
REDINGTON BEACH, FL 33708 US

Name and Address of New Registered Agent:

LYNCH, ERIKA M PRES.
THREE 163RD AVE E
REDINGTON BEACH, FL 33708 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: ERIKA M. LYNCH

02/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LYNCH, MICHAEL J
Address: THREE 163RD AVE E
City-St-Zip: REDINGTON BEACH, FL 33708

Title: PD () Delete
Name: LYNCH, ERIKA
Address: THREE 163RD AVE E
City-St-Zip: REDINGTON BEACH, FL 33708

Title: ST (X) Delete
Name: FOOTS, MARCIA
Address: FOUR 163RD AVE
City-St-Zip: SAINT PETERSBURG, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. (X) Change () Addition
Name: LYNCH, MICHAEL J
Address: THREE 163RD AVE E
City-St-Zip: REDINGTON BEACH, FL 33708

Title: PRES (X) Change () Addition
Name: LYNCH, ERIKA
Address: THREE 163RD AVE E
City-St-Zip: REDINGTON BEACH, FL 33708

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIKA M. LYNCH

PRES

02/19/2007

Electronic Signature of Signing Officer or Director

Date