2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731170

FILED Apr 25, 2008 Secretary of State

Entity Name: VISTA D'ORO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:				
	CORAL PKWY	WEST						
SUITE 103 CAPE COF	RAL, FL 33914							
Current Mailing Address:				New Mailing Address:				
C/O AMER	RICAN CONDO	MGMT						
PO BOX 10		US						
FEI Number:	59-1977342	FEI Number Applied For ()	FEI Number I	lot Appli	cable ()	Certifica	ate of Status Desired	()
Name and	Address of Cu	ırrent Registered Agent:	Nar	ne and	Address o	f New Reg	jistered Agent:	
615 CAPE CAPE COF	RICAN CONDO CORAL PKWY RAL, FL 33914	WEST SUITE 103 US						
	named entity รเ e of Florida.	ubmits this statement for the	purpose of cha	nging it	s registered	d office or r	registered agent, o	r both,
SIGNATUF	RE:							
	Electronic	Signature of Registered Ag	ent				Date	
OFFICERS AND DIRECTORS:				NOITIC	S/CHANGE	S TO OFF	FICERS AND DIRE	ECTORS:
Title: Name: Address: City-St-Zip:	SD ()[GATNY, ROMAN 1746 BEACH PK CAPE CORAL, F	WY #D-8	Title: Nam Addr City-	e:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	VD ()[RECCHIA, FRED 1734 BEACH PK CAPE CORAL, F	WY C11	Title: Nam Addr City-	e:	VD PELLOCK, S 3926 SE 2NI CAPE CORA	O AVE		
Title: Name: Address: City-St-Zip:	TD ()[RINALDI, FRANK 1718 BEACH PK CAPE CORAL, F	WY, B5	Title: Nam Addr City-	e:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	P ()[DIAMOND, ALAN 2600 COLBERT WAUKEGAN, IL	ROAD	Title: Nam Addr City-	e:	D DIAMOND, A 2600 COLBE WAUKEGAN	RT ROAD		
Title: Name: Address: City-St-Zip:	D () E ZIZZA, ROCCO 1738 BEACH PK CAPE CORAL, F		Title: Nam Addr City-	e:	PD KLOEKER, 2 1712 BEACH CAPE CORA	I PKWY A8	,	
Title: Name: Address: City-St-Zip:	D ()[HOETT, THOMAS 14040 OLD HOL' LINDSTROM, MN	тст	Title: Nam Addr City-	e:	D SKRUPA, DA 1746 BEACH CAPE CORA	I PKWY, D5	,	

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

SIGNATURE: JOHN KLOEKER P 04/25/2008