

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738270

FILED
Mar 11, 2009
Secretary of State

Entity Name: DELVISTA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11784 W SAMPLE RD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065

Current Mailing Address:

11784 W SAMPLE RD
CORAL SPRINGS, FL 33065

New Mailing Address:

11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065

FEI Number: 59-2071375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGMT
11784 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MGMT
11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEIZEROVICH, GUSTAVO
Address: 20450 N.E. 34 COURT
City-St-Zip: AVENTURA, FL 33180

Title: SD () Delete
Name: KOBRIN, BONNIE
Address: 20404 NE 34 CT
City-St-Zip: AVENTURA, FL 33180

Title: PD () Delete
Name: WEINREB, BOB
Address: 20448 NW 34TH COURT
City-St-Zip: AVENTURA, FL 33180

Title: SD () Delete
Name: DOUGHERTY, KRIS
Address: 20454 NE 34TH COURT
City-St-Zip: AVENTURA, FL 33180

Title: TD () Delete
Name: REDLICH, CAROL
Address: 20418 NE 34TH CT
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: DOUGHERTY, KRIS
Address: 20454 NE 34TH COURT
City-St-Zip: AVENTURA, FL 33180

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

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: MARY LOU PALMER

AGT

03/11/2009

Electronic Signature of Signing Officer or Director

Date