2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# 741439

Entity Name: VIVIENDA WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

699 VIVIENDA WEST BOULEVARD
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

C/O PAMS
P.O. BOX 595
BRADENTON, FL 34282

New Mailing Address:

FEI Number: 59-1852536 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'GRADY, CYNTHIA
3380 RUSTIE RD
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

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: CYNTHIA OGRADY

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	VD	( ) Delete
Name:	MILES, NANCY	
Address:	1655 BAL HARBOUR	
City-St-Zip:	VENICE, FL 34293	
Title:	PD	( ) Delete
Name:	CIPYWNYK, HAROLD	
Address:	721 VIVIENDA WEST BLVD	
City-St-Zip:	VENICE, FL 34293	
Title:	VD	( ) Delete
Name:	MILLS, MARILYN	
Address:	761 VIVIENDA SOUTH CT	
City-St-Zip:	VENICE, FL 34293	
Title:	TD	( ) Delete
Name:	MARCOAK, YVONNE	
Address:	747 VIVIENDO NORTH CT	
City-St-Zip:	VENICE, FL 34293	
Title:	SD	( ) Delete
Name:	HARNOIS, AGNES	
Address:	775 VIVIENDA SO. CT.	
City-St-Zip:	VENICE, FL 34293	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: HAROLD CIPPYWYNK PD 04/17/2009

Electronic Signature of Signing Officer or Director — Date