

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 31, 2009
Secretary of State

DOCUMENT# 743600

Entity Name: BELLA VISTA VILLAS CONDOMINIUM NO. ONE ASSOCIATION, INC.**Current Principal Place of Business:**2200 NW 102 AVE
5
DORAL, FL 33172**New Principal Place of Business:****Current Mailing Address:**2200 NW 102 AVE
5
DORAL, FL 33172 US**New Mailing Address:****FEI Number:** 59-2029427**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**YABLN, ARNOLD
699 S FEDERAL HWY
HOLLYWOOD, FL 33020 US**Name and Address of New Registered Agent:**EISINGER, DENNIS
4000 HOLLYWOOD BOULEVARD
SUITE 265-S
HOLLYWOOD, FLORIDA, FL 33021 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: DENNIS EISINGER

07/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: ADVINCULA, ANDRES
Address: 4495 W 14 COURT
City-St-Zip: HIALEAH, FL 33012 US

Title: VP () Delete
Name: RUIZ, WILLY
Address: 1443 W 44 PLACE
City-St-Zip: HIALEAH, FL 33012 US

Title: TD () Delete
Name: FERNANDEZ, LORINZO
Address: 4515 W 14 COURT #104
City-St-Zip: HIALEAH, FL 33012 US

Title: S () Delete
Name: VEGH, LOURDES
Address: 4549 W 14 COURT
City-St-Zip: HIALEAH, FL 33012 US

Title: D (X) Delete
Name: ALVAREZ, JORGE
Address: 4547 W 14 LANE
City-St-Zip: HIALEAH, FL 33012 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: RUIZ, WILLY
Address: 1443 W 44 PLACE
City-St-Zip: HIALEAH, FL 33012 US

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: WILLY RUIZ

P

07/31/2009

Electronic Signature of Signing Officer or Director

Date