

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749753

FILED
Apr 01, 2009
Secretary of State

Entity Name: FAIRVIEW VISTA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

VISTA COMMUNITY ASSOC. MGMT.
225 S. WESTMONTE DR, #3310
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

PO BOX 162147
ALTAMONTE SPRINGS, FL 327162147 US

New Mailing Address:

FEI Number: 59-2021943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOMACK, ELLEN R AGENT
225 S. WESTMONTE DRIVE, SUITE 3310
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

WOMACK, ELLEN R
225 S. WESTMONTE DRIVE, SUITE 3310
ALTAMONTE SPRINGS, FL 32714 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: ELLEN R WOMACK

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JENSEN, BRUCE
Address: 4113FAIRVIEW VISTA POINT 209
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: KAZAROS, CHUCK
Address: 4105 FAIRVIEW VISTA POINT 326
City-St-Zip: ORLANDO, FL 32804

Title: DVP () Delete
Name: LANDFAIR, KATHY
Address: 4113 FAIRVIEW VISTA POINT 112
City-St-Zip: ORLANDO, FL 32804

Title: SD () Delete
Name: FIKE, LOUISE
Address: 4101 FAIRVIEW VISTA POINT 233
City-St-Zip: ORLANDO, FL 32804

Title: TD () Delete
Name: BOWTIN, PATRICIA
Address: 4109 FAIRVIEW VISTA POINT 214
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVP (X) Change () Addition
Name: ALEXANDER, BRIAN
Address: 4117 FAIRVIEW VISTA POINT 304
City-St-Zip: ORLANDO, FL 32804

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

Title: TD (X) Change () Addition
Name: MCGINNIS, ADAM
Address: 4109 FAIRVIEW VISTA POINT 118
City-St-Zip: ORLANDO, FL 32804

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: BRUCE JENSEN

PD

04/01/2009

Electronic Signature of Signing Officer or Director

Date