

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751658

FILED
Apr 08, 2009
Secretary of State

Entity Name: VISTA DEL LAGO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2950 JOG ROAD
GREENACRES, FL 33467 US

New Principal Place of Business:

1800 EMBASSY DR.
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

2950 JOG ROAD
GREENACRES, FL 33467 US

New Mailing Address:

C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467 US

FEI Number: 59-2047713

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST. JOHN, CORE, & LEMME, P.A.
1601 FORUM PLACE
SUITE 701
WEST PALM BEACH, FL 33401 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MACALUSO, CARL
Address: 1800 EMBASSY DR #123
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: BUIE, ALTAMEASE
Address: 1800 EMBASSY DR 108
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD () Delete
Name: HOFFRICHTER, MERLE
Address: 1800 EMBASSY DR #131
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD () Delete
Name: PARASHELES, PETER
Address: 1800 EMBRY DR #135
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D (X) Delete
Name: HAWTHORNE, ELLENIE
Address: 1800 EMBASSY DR. 124
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: BUIE, ALTAMEASE
Address: 1800 EMBASSY DR 108
City-St-Zip: WEST PALM BEACH, FL 33401

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: CARL MACALUSO

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date