

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754247

FILED
Apr 22, 2009
Secretary of State

Entity Name: FARMINGTON VISTAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

181 CENTER RD
VENICE, FL 34285

New Principal Place of Business:

181 CENTER ROAD
VENICE, FL 34285

Current Mailing Address:

181 CENTER RD
VENICE, FL 34285

New Mailing Address:

181 CENTER ROAD
VENICE, FL 34285

FEI Number: 59-2169103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285 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: BORANS, DAVID P
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: LASALA, LENARD
Address: 899 WOODBRIDGE DR
City-St-Zip: VENICE, FL 34293

Title: SD () Delete
Name: GIFFORD, HAROLD
Address: 899 WOODBRIDGE DR
City-St-Zip: VENICE, FL 34293

Title: VPD () Delete
Name: TATAY, GABRIEL
Address: 899 WOODBRIDGE DR
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: SPERRY, BOB
Address: 899 WOODBRIDGE DR
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: UTTON, FORD
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285

Title: S (X) Change () Addition
Name: JOHNSON, LINDA
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285

Title: D (X) Change () Addition
Name: GIFFORD, HAROLD
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285

Title: VP (X) Change () Addition
Name: IOVANNA, TONY
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285

Title: P (X) Change () Addition
Name: BORANS, DAVID
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285

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: SHAUN O'GRADY

CAM

04/22/2009

Electronic Signature of Signing Officer or Director

Date