

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**May 14 1997 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 755375 (3)**  
 1. Corporation Name  
**VISTA ROYALE GARDENS ASSOCIATION, INC.**

Principal Place of Business <b>20-A VISTA GARDENS TRL VERO BCH FL 32962 US</b>	Mailing Address <b>20-A VISTA GARDENS TRAIL VERO BEACH FL 32962-1700 US</b>
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3. Date incorporated or Qualified <b>12/03/1980</b>	3a. Date of Last Report <b>04/23/1996</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number <b>59-2106966</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**ELLIOTT, RICHARD D.  
 C/O ELLIOTT MERRILL COMMUNITY MGMT  
 1105-12TH STREET  
 VERO BEACH FL 32960**

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>SALVATORE, LUCY V.</b>	1.2 NAME	<b>TOWNSEND, JOHN</b>
STREET ADDRESS	<b>20-102 VISTA GARDENS TRAIL</b>	1.3 STREET ADDRESS	<b>11-107 Vista Gardens Trail</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	1.4 CITY-ST-ZIP	<b>Vero Beach, FL 32962</b>
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<b>VB</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>JOHNSON, DONALD</b>	2.2 NAME	<b>BATT, RAYMOND</b>
STREET ADDRESS	<b>20-101 VISTA GARDENS TRAIL</b>	2.3 STREET ADDRESS	<b>36-106 Vista Gardens Trail</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	2.4 CITY-ST-ZIP	<b>Vero Beach, FL 32962</b>
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>REYNOLDS, GILES W.</b>	3.2 NAME	<b>RIOTTO, CHARLES</b>
STREET ADDRESS	<b>23-205 VISTA GARDENS TRAIL</b>	3.3 STREET ADDRESS	<b>14-102 Vista Gardens Trail</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	3.4 CITY-ST-ZIP	<b>Vero Beach, FL 32962</b>
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MEDLEY, RICHARD</b>	4.2 NAME	<b>MEDLEY, RICHARD</b>
STREET ADDRESS	<b>22-102 VISTA GARDENS TRAIL</b>	4.3 STREET ADDRESS	<b>22-102 Vista Gardens Trail</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	4.4 CITY-ST-ZIP	<b>Vero Beach, FL 32962</b>
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>GENTILE, FRANCIS</b>	5.2 NAME	<b>VALADIE, M.G. "VAL"</b>
STREET ADDRESS	<b>16-207 VISTA GARDENS TRAIL</b>	5.3 STREET ADDRESS	<b>22-201 Vista Gardens Trail</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	5.4 CITY-ST-ZIP	<b>Vero Beach, FL 32962</b>
TITLE	TD <input type="checkbox"/> DELETE	6.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ELMIGER, FREDERICK</b>	6.2 NAME	<b>ELMIGER, FREDERICK</b>
STREET ADDRESS	<b>37-202 VISTA GARDENS TRAIL</b>	6.3 STREET ADDRESS	<b>37-202 Vista Gardens Trail</b>
CITY-ST-ZIP	<b>VERO BEACH FL</b>	6.4 CITY-ST-ZIP	<b>Vero Beach, FL 32962</b>

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Raymond W. Batt* **Raymond W. Batt 3-4-97 561-562-7789**

CR2E037 (9/96)