

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762124

FILED
Mar 15, 2012
Secretary of State

Entity Name: VISTA ST. LUCIE ASSOCIATION, INC.

Current Principal Place of Business:

30 A LAKE VISTA TRAIL
PT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

30 A LAKE VISTA TRAIL
PT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 59-2314873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RYDZEWSKI, ROBERT G JR.
CORNETT, GOOGE & ASSOCIATES, P.A.
401 EAST OSCEOLA STREET
STUART, FL 34994 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: T
Name: CHANDLER, DONNA E
Address: 3790 NE LINDA DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

Title: VP
Name: POTTER, MEL
Address: 3 LAKE VISTA TRL 207
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D
Name: QUESNELL, CARL
Address: 6 LAKE VISTA TRL 201
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: P
Name: DESROCHERS, JOSEPH
Address: 4 LAKE VISTA TRAIL, # 201
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: S
Name: GALLERY, DIANE
Address: 32 LAKE VISTA TRAIL #201
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: D
Name: LEVY, VIRGINIA
Address: 32 LAKE VISTA TRAIL, # 207
City-St-Zip: PORT SAINT LUCIE, FL 34952

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH L. DESROCHERS

PRES

03/15/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date