

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765747

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** VISTANA FALLS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13800 STATE ROAD 535  
ORLANDO, FL 328216350 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22197  
LAKE BUENA VISTA, FL 328302197 US

**New Mailing Address:**

**FEI Number:** 59-2239337

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: SD ( ) Delete  
Name: CLEIN, MICHAEL  
Address: 1409 CLUB HILL BLVD  
City-St-Zip: MCCALL, ID 83638 US

Title: VPD ( ) Delete  
Name: BRANDYMORE, NELSON A  
Address: 190 N FREMONT ST  
City-St-Zip: COLDWATER, MI 49036

Title: TD ( ) Delete  
Name: ROBINSON, MARK  
Address: 14603 WOODLAKE TRACE  
City-St-Zip: LOUISVILLE, KY 40245

Title: PD ( ) Delete  
Name: MAHONEY, THOMAS JR.  
Address: 5 NOBLE JONES LANE  
City-St-Zip: SAVANNAH, GA 31411

Title: VPD ( ) Delete  
Name: BARNUM, STEVE  
Address: 6800 E BROWN ROAD  
City-St-Zip: LAKE ODESSA, MI 48849

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: JOYCELYN, RAY  
Address: 11111 CANYON TRAIL  
City-St-Zip: HOUSTON, TX 77066 US

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

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

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

Title: SD (X) Change ( ) Addition  
Name: BARNUM, STEVE  
Address: 6800 E BROWN ROAD  
City-St-Zip: LAKE ODESSA, MI 48849

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: THOMAS MAHONEY

PD

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date