2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#811716

Entity Name: MAR VISTA APARTMENTS INC

FILED Feb 03, 2009 Secretary of State

Littly Name. WAR VISTA AFARTMENTS INC					
Current Pi	incipal Place o	of Business:	New Principal Place	e of Business:	
	BOR DRIVE RDALE, FL 33:	316			
Current M	ailing Address	s:	New Mailing Addres	New Mailing Address:	
1322 SW 1 FORT LAU	7 ST DERDALE, FL	33316 US	1322 SE 17 ST FORT LAUDERDALE	E, FL 33316 US	
FEI Number:	59-6065770	FEI Number Applied F	For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	urrent Registered A	Agent: Name and Address	Name and Address of New Registered Agent:	
3013 HARE	, KATHLEEN BOR DR DERDALE, FL	33316 US			
The above in the State		ubmits this statemen	t for the purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic	c Signature of Regis	tered Agent	Date	
Election Can	npaign Financing	Trust Fund Contributio	n ().		
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SD ()[MYLES, WEGMA 3013 HARBOR D FT LAUDERDALE	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ()[HERBERT, KATH 3013 HARBOR D FT LAUDERDALE	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () E HOPKINS, VERO 3013 HARBOR D FORT LAUDERD	RIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D ()	Delete	Title:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: KATHLEEN HERBERT PD 02/03/2009

ANDREW, DOMMICK

3013 HARBOR DRIVE

FORT LAUDERDALE, FL

Name:

Address:

City-St-Zip: