# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 16, 2011**
**Secretary of State**

DOCUMENT# F97000005810

**Entity Name:** G.P. VISTA PLAZA, INC.

**Current Principal Place of Business:**

TWO TOWNE SQUARE
SUITE 900
SOUTHFIELD, MI 48076

**New Principal Place of Business:**

**Current Mailing Address:**

TWO TOWNE SQUARE
SUITE 900
SOUTHFIELD, MI 48076

**New Mailing Address:**

**FEI Number: 65-0792863** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PETER D. CUMMINGS & ASSOCIATES, INC.
4801 PGA BLVD
PALM BEACH GARDENS, FL 33418 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: CPT
Name: CUMMINGS, PETER D
Address: TWO TOWNE SQUARE, STE. 900
City-St-Zip: SOUTHFIELD, MI 48076

Title: VS
Name: CUMMINGS, KEITH L
Address: 4801 PGA BLVD
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V
Name: DEAN, DAVID A
Address: 4801 PGA BLVD
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

SIGNATURE: DAVID A. DEAN V 02/16/2011

Electronic Signature of Signing Officer or Director — Date