FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 31 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K72589

(0)

Mailing Address

VISTA DEVELOPMENTS OF SOUTHWEST FLORIDA, INC.

7575 DR. PHILLIPS BLVD. SUITE 365 ORLANDO FL 32819 US			7575 DR. PHILLIPS BLVD. SUITE 365 ORLANDO FL 32819-7220 US				3	Date Incorv	reted or O	ualified	l 3a D	ate of Last	Renort
										2/29/1996			
	ace of Business		2a. Mailing Address				4,	FEI Number					opplied For
21	0		26					59-2940	108				lot Applicable
Suite, Apt #, etc			Suite, Apt. #, etc.			5.	Certificate of	Status De	sired		Fee f	Additional Required	
City & State 23)		City & State				1	Election Can Trust Fund C					May Be I to Fees
Zip	C	buntry	Zip	Co	untry		8.	This corpora	tion has lia				s. 199.032,
24	25		[29]	30	,			Florida Statu				√ No	
		daress of Current	Registered Agent		81	Name	10,	Name and /	COOTESS OF	New Het	Istered	Agent	
	L, EDWARD A												
	DR. PHILLIPS E	ILVU.			82	Street Add	dress (P.	O. Box Num	ber is Not /	Acceptab	le)		
	E 365				83		·						
OHD	ANDO FL 32819												
					84	City					FL	85 Zip	Code
11. Pursuant t	o the provisions of	Sections 607 0502	and 607.1508, Florida Statu	tes the a	bove-	named cor	poration	submits this	statement	for the p	urpose o	f changing	its registered
office or re	edistered agent, or	both, in the State	of Florida Such change was tions of, Section 607.0505, Fl	authorize	d by	the corpora	ation's bo	oard of direc	tors. I here	by accep	t the app	ointment a	s registered
J	m tamiliar with, and	accept the obliga	nons or, Section 607,0505, Fi	iorida Sta	uules.								
SIGNATURE	Signature, type of or painte	d name of registered agei	t and title if applicable (NO	TE: Registere	ed Agen	I signature requ	uired when r	re-nstating)			DATE		
12.		OFFICERS AND		13.			Α	DDITIONS/C	HANGES 1	O OFFIC	ERS ANI	DIRECTO	RS IN 12
TITLE	DP		DELETE	1.3 T	ITLE							Change	Addition
NAME	MORRIS, MEL	D.		1.2 N	IAME								
STREET ADDRESS	115 MOUNT S			135	TREET A	DDRESS			-				
CITY-ST-ZIP	LONDON EN			1.4 0	TY-ST	-ZIP							
TITLE	VPDS		☐ DELETE	211	ITLE							Change	Addition
NAME	NEAL, EDWAR			221	IAME]							
STREET ADDRESS	7575 DR. PHIL	Lips Blvd.		2.3 5	TREET	DDRESS							
CITY-ST-ZIP	ORLANDO FL			2 4	CITY - ST	-ZIP				Sec.			
1:TLE	D		☐ DELETE	3 1 T	ITLE							☐ Change	Addition
NAME	MORAN, THOM			3.2 N	IAME						•		
STREET ADDRESS	7575 DR. PHIL			3.3.5	TREET A	DDRESS							
CITY-ST-ZIP	ORLANDO FL	32819		_	CITY - S1	- 2IP					_,		
11TLF			DELETE	4.1 7								Change	Addition
NAME					NAME								
STREET ADDRESS						DDRESS							
CITY - ST - ZIP		_	T pourte	_	CITY-ST	-ZIP		· · · · · · · · · · · · · · · · · · ·				Ch	A statistic
TITLE			☐ DELETE	5.1 7								[] Change	Addition
NAME					IAME					-			
STREET ADDRESS						IDORESS							
CITY - ST - ZIP			DELETE		HY-ST	- ZIP						Change	☐ Addition
TITLE			L.J DELETE	6.17								L. CHANGE	L ADDITION
NAME					IAME								
STREET ADDRESS						DDRESS							
CITY-S1-ZIP	w cortify that the is	formation number	with this filing dos not qual		12-YIK		ad in Sec	ction 119 07	3)(i) Elada	a Statuto	a I footba	r certify the	at the
informatio	n indicated on this	annual report or s	upplemental annual report is the receiver or trustee empor on an attachmen with an ad	true and	accui	ate and the	at my sig	gnature shall	have the s napter 607.	ame lega Florida S	l effect a tatutes; a	s if made i	inder oath; that name