

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000067977

Entity Name: DE LA VISTA VILLA, LLC

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1309 BANDO LANE  
THE VILLAGES, FL 32162

**New Principal Place of Business:**

**Current Mailing Address:**

1309 BANDO LANE  
THE VILLAGES, FL 32162

**New Mailing Address:**

FEI Number: 27-2997318

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SZAKACS, KIMBERLI  
1309 BANDO LANE  
THE VILLAGES, FL 32162 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SZAKACS, KIM  
Address: 17309 73RD DR NE  
City-St-Zip: ARLINGTON, WA 98223

Title: MGR  
Name: HAMON, D. ROBERT  
Address: 7522 NORTHWOODS DR  
City-St-Zip: SUGARLAND, TX 77479

Title: MGR  
Name: HAMON, JAMES B  
Address: 545 MANN'S HARBOR DRIVE  
City-St-Zip: APOLLO BEACH, FL 33572

Title: MGRM  
Name: STINSON, GAYLE  
Address: 1309 BANDO LANE  
City-St-Zip: THE VILLAGES, FL 32162

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KIMBERLI SZAKACS

MGR

01/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date