Buena Vida Master Association, Inc.

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 8:00 am
Secretary of State
05-21-2007 90062 001 ***183.75

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1. Entity Name
BUENA VIDA MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4400 W SAMPLE RD, STE 200 COCONUT CREEK, FL 33073-3450	4400 W SAMPLE RD, STE 200 COCONUT CREEK, FL 33073-3450

02152007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1961 VIA BUENA VIDA	1961 VIA BUENA VIDA
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WELLINGTON, FL	City & State: WELLINGTON, FL
Zip: 33411 Country	Zip: 33411 Country

4. FEI Number: 65-1108497 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
POSIN, HARRY L 4400 W SAMPLE RD, STE 200 COCONUT CREEK, FL 33073	Name: LOUIS CAPLAN, C/O SACHS & SAX Street Address (P.O. Box Number is Not Acceptable): 301 YAMATO ROAD, SUITE 4150 City: BOCA RATON FL Zip Code: 33431

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ c/o Sachs + Sax 5/15/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BEER, T.R. 4400 W SAMPLE RD, STE 200 COCONUT CREEK, FL 330733450	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SCHWEITZER, BOB 8913 VIA GRANDE EAST WELLINGTON, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STEELMAN, MICHELLE 4400 W SAMPLE RD, STE 200 COCONUT CREEK, FL 33073	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPS PERSHAN, BARRY 9458 VIA ELEGANTE WEST WELLINGTON, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD RODGERS, FRANK 4400 W SAMPLE RD, STE 200 COCONUT CREEK, FL 330733450	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD FELDMAN, BARRY 9902 VIA ELEGANTE WEST WELLINGTON, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GROPPER, SANDY 8681 VIA BRILLIANTE WELLINGTON, FL 33411	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCHIPANI, TOM 9722 VIA ELEGANTE WEST WELLINGTON, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHIPANI, TOM 9722 VIA ELEGANTE WELLINGTON, FL 33411	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAUTENBACH, BUD 8865 VIA GRANDE EAST WELLINGTON, FL 33411	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAPOZA, DAVID 9410 VIA ELEGANTE WEST WELLINGTON, FL 33411	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 5/3/07 561-791-7884
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #