2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007532

FILED Apr 29, 2008 Secretary of State

Entity Name: VILLA VISTOSA CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 326 SECOND AVENUE S NAPLES, FL 34102 **Current Mailing Address: New Mailing Address:** 326 SECOND AVENUE S 1929 IMPERIAL GOLF COURSE BLVD. NAPLES, FL 34102 NAPLES, FL 34110 FEI Number: 65-1089573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WAKELAND, DAVID F 1929 IMPERÍAL GOLF COURSE BLVD NAPLES, FL 34110 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition WHELDON, DAVID WHELDON, DAVID Name: Name: 1418 NORTH WUAKEGAN ROAD Address: 110 W. KESWICK LANE Address: City-St-Zip: LAKE FOREST, IL 60045 City-St-Zip: LAKE FOREST, IL 60045 Title: Title: () Delete () Change () Addition Name: BIPPEN, LISA Name: Address: 549 HICKORY LANE Address: City-St-Zip: ST. LOUIS, MO 63131 City-St-Zip: Title: () Delete Title: () Change () Addition BIPPEN, DANIEL Name: Name: 549 HICKORY LANE Address: Address: City-St-Zip: ST. LOUIS, MO 63131 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WHELDON, DAWN Name: WHELDON, DAWN Address: 1418 NORTH WAUKEGAN ROAD Address: 110 W. KESWICK LANE City-St-Zip: LAKE FOREST, IL 60045 City-St-Zip: LAKE FOREST, IL 60045

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

SIGNATURE: DAVID WHELDON D 04/29/2008