

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004581

FILED  
Mar 30, 2005  
Secretary of State

Entity Name: VISTA POINTE HOMEOWNERS ASSOCIATION OF BREVARD COUNTY, INC.

**Current Principal Place of Business:**

4795 FAY BLVD STE 5  
COCOA, FL 32927

**New Principal Place of Business:**

5062 BOGEY PL  
COCOA, FL 32927

**Current Mailing Address:**

4795 FAY BLVD STE 5  
COCOA, FL 32927

**New Mailing Address:**

5062 BOGEY PL  
COCOA, FL 32927

FEI Number: 01-0665268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MESSER, SANDRA  
4795 FAY BLVD STE 5  
COCOA, FL 32927 US

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

MCDONALD, MARTY  
5062 BOGEY PL  
COCOA, FL 32927 US

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: MARTY MCDONALD

03/30/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MESSER, JIM  
Address: 4795 FAY BLVD STE 5  
City-St-Zip: COCOA, FL 32927

Title: D ( ) Delete  
Name: MESSER, SANDRA  
Address: 4795 FAY BLVD STE 5  
City-St-Zip: COCOA, FL 32927

Title: D ( ) Delete  
Name: BORCHERT, JESSIE  
Address: 4795 FAY BLVD STE 5  
City-St-Zip: COCOA, FL 32927

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MCDONALD, MARTY  
Address: 5062 BOGEY PL  
City-St-Zip: COCOA, FL 32927

Title: V (X) Change ( ) Addition  
Name: CASTILLO, BETSY  
Address: 5032 BOGEY PL  
City-St-Zip: COCOA, FL 32927

Title: S/T (X) Change ( ) Addition  
Name: MESSER, KELLY  
Address: 5051 BOGEY PL  
City-St-Zip: COCOA, FL 32927

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JIM MESSER

D

03/30/2005

Electronic Signature of Signing Officer or Director

Date