2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 11, 2009
Secretary of State

DOCUMENT# N02000008468

Entity Name: VIZCAYA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

1145 SAWGRASS PARKWAY
FORT LAUDERDALE, FL 33323

New Principal Place of Business:

Current Mailing Address:

1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 45-0510503 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DAVIDSON, RICARDO
Address: 5091 SW 128 AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: DV ( ) Delete
Name: HERNANDEZ, FRED
Address: 5091 SW 128 AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: DT ( ) Delete
Name: KENNEDY, JOHN
Address: 5091 SW 128 AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: DS ( ) Delete
Name: ESTRADA, KAREN
Address: 5091 SW 128 AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: CARABALLO, ROGELIO
Address: 5091 SW 128 AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: MARTE, REYNALDO
Address: 5091 SW 128 AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change ( ) Addition
Name: FERNANDEZ, MIGUEL
Address: 4937 SW 135 AVE
City-St-Zip: MIRAMAR, FL 33027

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MICHAEL CAPUTO MGR 06/11/2009

Electronic Signature of Signing Officer or Director — Date