

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008935

FILED
Mar 03, 2009
Secretary of State

Entity Name: BOCA VISTA HARBOR D CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 97
6020 BOCA GRANDE CAUSEWAY
BOCA GRANDE, FL 33921 US

New Principal Place of Business:

13413 GASPARILLA ROAD
PLACIDA, FL 33946 US

Current Mailing Address:

PO BOX 97
BOCA GRANDE, FL 33921 US

New Mailing Address:

FEI Number: 65-1171716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT PETERSON-GRANDE VACATION ISLAND INC.
6020 BOCA GRANDE CAUSEWAY
BOCA GRANDE, FL 33921 US

Name and Address of New Registered Agent:

GRANDE VACATION ISLAND INC.
6020 BOCA GRANDE CAUSEWAY
BOCA GRANDE, FL 33921 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: SCOTT D. PETERSON

03/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KLAUBERT, MIKE
Address: 45 TEDDINGTON WAY
City-St-Zip: LACONIA, NH

Title: D () Delete
Name: MORROW, JAMES
Address: 542 SADDLE LANE
City-St-Zip: GROSSE POINTE, MI 48236

Title: DVP () Delete
Name: ZURICK, CRAIG
Address: 9 BERRY LN
City-St-Zip: RANDOLPH, NJ 07869

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KLAUBERT, MIKE
Address: 45 TEDDINGTON WAY
City-St-Zip: LACONIA, NH 03246

Title: DT (X) Change () Addition
Name: MORROW, JAMES
Address: 542 SADDLE LANE
City-St-Zip: GROSSE POINTE WOODS, MI 48236

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: MIKE KLAUBERT

DP

03/03/2009

Electronic Signature of Signing Officer or Director

Date