FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

Principal Place of Business
49 PLANTATION DRIVE
VERO BCH. FL 32966

VERO BEACH FL 32962

DOCUMENT # N02845

(8)

VISTA PLANTATION ASSOCIATION, INC.

I, INC.									
Mailing Address	T HADYMAN DIN BENIA DININ BIRDI, BIRLI								
49 PLANTATION DRIVE VERO BCH. FL 32966	3. Date Incorporated or Qualified 05/01/1984 4. FEI Number Applied For	05/01/1984							

FILED

Apr 16 1998 8:00am

Secretary of State

						59-2801815 Not	Applicable		
Principal Place of Business		2a. Mailing Ac				5. Certificate of Status Desired S8.75 Ac Fee Req			
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.				\$5.00 May Be Added to Fees		
City & State		City & Star	City & State			7. Is this nonprofit corporation a homeowners association? X Yes \(\subseteq \) No			
Zip	Country 25	Zip 29	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 🔀 Yes 🔲 No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
PROCEST BAN			81 82		dress (P.O. Box Number is Not Acceptable)				

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

City

SIGNATURE _										
Signature, typed or printed name of registered agent and title H applicable (NOTE: Registered Agent signature required when reinstating) DATE										
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	PD	☐ DELETE	1.1 TITLE	VD	Change	Addition				
NAME	alphonso, trulli		1.2 NAME	JEAN LANE						
STREET ADDRESS	32 PLANTATION DR., #202		1.3 STREET ADDRESS	3 PLANTATION DRIVE, #206						
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP	VERO BEACH, FL 32966-8071						
TITLE	VD .	™ DELETE	2.1 TITLE	SD	Change Change	Addition				
NAME	Sundgren, Roy		2.2 NAME	DÖROTHY ATHANASAKOS						
STREET ADDRESS	25 PLANTATION DR., #203		2.3 STREET ADDRESS	1 PLANTATION DRIVE, #101						
CITY-ST-21P	VERO BCH FL		2. 4 CITY-ST-ZIP	VERO BEACH, FL 329668069						
TITLE	D	☐ DELETE	3.1 TITLE	D	Change	XXAddition				
NAME	BAINES, WALLACE		3.2 NAME	RAY NOELL						
STREET ADDRESS	45 PLANTATION DR., #204		3.3 STREET ADDRESS	5 PLANTATION DRIVE, #101						
CITY-ST-ZIP	VERO BCH FL		3.4. CITY-ST-ZIP	VERO BEACH, FL 32966-8096						
TITLE	TD	☐ DELETE	4.1 TITLE		Change	Addition				
NAME	KELLEHER, RICHARD		4. 2 NAME							
STREET ADDRESS	18 PLANTATION DR., #106		4.3 STREET ADDRESS							
CITY-ST-ZIP	VERO BCH FL		4.4 CITY-ST-ZIP							
TITLE	D	☐ DELETE	5.1 TITLE		Change	Addition				
NAME	MCMANUS, MARGARET		5.2 NAME							
STREET ADDRESS	42 PLANTATION DR., #202		5.3 STREET ADDRESS							
CITY-ST-ZIP	VERO BCH FL		5.4 CITY-ST-ZIP							
TITLE	D	EX DELETE	6.1 TITLE		☐ Change	Addition				
NAME	LANE, JEAN		6.2 NAME							
STREET ADDRESS	3 PLANTATION DR., #208		6.3 STREET ADDRESS							
CITY CT 710	VERO REACH EI		CAPITY OF 3th							

14. It is that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alphoneo A. Trulli, president

Ellanso Dobulli

561-569-2226

CR2E037 (10/97)

Zip Code