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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N02845

1. Corporation Name

VISTA PLANTATION ASSOCIATION, INC.

Principal Place of Business

49 PLANTATION DRIVE
VERO BCH. FL 32966

Mailing Address

49 PLANTATION DRIVE
VERO BCH. FL 32966



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

05/01/1984

4. FEI Number
59-2801815

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

**PROFFITT, RAY
100 VISTA ROYALE BLVD.
VERO BEACH FL 32962**

10. Name and Address of New Registered Agent

81 Name **Charles W. McKinnon**
82 Street Address (P.O. Box Number is Not Acceptable)
3405 Ocean Drive
83 *Charles W. McKinnon*
84 City **Vero Beach** **FL** 85 Zip Code **32963**

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.

SIGNATURE

Charles W. McKinnon
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-3-99

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	ALPHONSO, TRULLI	
STREET ADDRESS	32 PLANTATION DR., #202	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	VD	☐ DELETE
NAME	LANE, JEAN	
STREET ADDRESS	3 PLANTATION DR., #206	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	D	☒ DELETE
NAME	BAINES, WALLACE	
STREET ADDRESS	45 PLANTATION DR., #204	
CITY-ST-ZIP	VERO BCH FL	
TITLE	TD	☐ DELETE
NAME	KELLEHER, RICHARD	
STREET ADDRESS	18 PLANTATION DR., #106	
CITY-ST-ZIP	VERO BCH FL	
TITLE	D	☐ DELETE
NAME	MCMANUS, MARGARET	
STREET ADDRESS	42 PLANTATION DR., #202	
CITY-ST-ZIP	VERO BCH FL	
TITLE	SD	☐ DELETE
NAME	ATHANASAKOS, DOROTHY	
STREET ADDRESS	1 PLANTATION DRIVE, #101	
CITY-ST-ZIP	VERO BEACH FL 32966	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Arnold Townsend	
1.3 STREET ADDRESS	3 Plantation Dr., #103	
1.4 CITY-ST-ZIP	Vero Beach, FL 32966-8071	
2.1 TITLE	D	☐ Change ☒ Addition
2.2 NAME	Edward Oulund	
2.3 STREET ADDRESS	40 Plantation Drive, #106	
2.4 CITY-ST-ZIP	Vero Beach, FL 32966-7966	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify 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, with all other like empowered.

SIGNATURE:

Alphonso A. Trulli, President

Alphonso A. Trulli

Feb. 2, 1999 (561) 569-2226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)