2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004731

FILED Mar 19, 2004 Secretary of State

Entity Name: VISTA DEL SOL AT FORT LAUDERDALE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

310 SAN MARCO DR. 61 HENDRICKS ISLE

FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

310 SAN MARCO DR. 61 HENDRICKS ISLE

FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301

FEI Number: 57-1175973 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ATRIA, JAMES V JR.
310 SAN MARCO DR.
ATRIA, JAMES V JR.
61 HENDRICKS ISLE

FT. LAUDERDALE, FL 33301 FT. LAUDERDALE, FL 33301

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: JAMES V ATRIA JR 03/19/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: ATRIA, JAMES V JR. Name: ATRIA, JAMES V JR.

Address: 310 SAN MARCO DR. Address: 61 HENDRICKS ISLE
City-St-Zip: FT. LAUDERDALE, FL 33301 City-St-Zip: FT. LAUDERDALE, FL 33301

жу-о-- 2-р. 11. Едорык Баш, 11. 33301 — Ску-о-- 2-р. 11. Едорык Баш, 11. 33301

Title: VD () Delete Title: VD (X) Change () Addition Name: ATRIA, MICHAEL Name: ATRIA, MICHAEL

Address: 310 SAN MARCO DR. Address: 61 HENDRICKS ISLE
City-St-Zip: FT. LAUDERDALE, FL 33301 City-St-Zip: FT. LAUDERDALE, FL 33301

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 ATRIA, CAROL A
 Name:
 ATRIA, CAROL A

 Address:
 310 SAN MARCO DR.
 Address:
 61 HENDRICKS ISLE

 City-St-Zip:
 FT. LAUDERDALE, FL 33301
 City-St-Zip:
 FT. LAUDERDALE, FL 33301

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: MICHAEL ATRIA VD 03/19/2004