

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009767

FILED
Mar 09, 2009
Secretary of State

Entity Name: COMMUNITY ASSOCIATION FOR VISTAMERE, INC.

Current Principal Place of Business:

C/O WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

C/O WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 34-1985423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERDINANDSEN ENTERPRISE, INC
2884 S OSCEOLA AVE
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

FERDINANDSEN ENTERPRISE, INC
D.B.A. WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806 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:

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: HARWELL, SCOT P
Address: 5219 VISTAMERE COURT
City-St-Zip: ORLANDO, FL 32819

Title: ST () Delete
Name: THOMPSON, TONY
Address: 5212 VISTAMERE CT
City-St-Zip: ORLANDO, FL 32819

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HARTWELL, SCOT P
Address: 5219 VISTAMERE COURT
City-St-Zip: ORLANDO, FL 32819

Title: ST (X) Change () Addition
Name: THOMPSON, TONY
Address: 5212 VISTAMERE COURT
City-St-Zip: ORLANDO, FL 32819

Title: V () Change (X) Addition
Name: HARTWELL, LISA
Address: 5219 VISTAMERE COURT
City-St-Zip: ORLANDO, FL 32819

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: BRYAN MERCED

CAM

03/09/2009

Electronic Signature of Signing Officer or Director

Date