

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 05, 2009
Secretary of State

DOCUMENT# N03000010806

Entity Name: VIZCAYA HEIGHTS MULTICONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**8400 THE ESPLANADE
ORLANDO, FL 32836**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 530066
ORLANDO, FL 32835**New Mailing Address:****FEI Number:** 01-0810287**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAYLOR & CARLS, P.A.
150 NORTH WESTMONTE DRIVE
ALTAMONTE SPRINGS, FL 32714 US**Name and Address of New Registered Agent:**HENDERSON SACHS, PA
7680 UNIVERSAL BLVD.
SUITE 100
ORLANDO, FL 32819 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: JOSHUA M SACHS, ESQ

09/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: KOHN, DAVID
Address: 7380 W. SAND LAKE RD., 420
City-St-Zip: ORLANDO, FL 32819

Title: PD () Delete
Name: STRASBERG, RON
Address: 8761 THE ESPLANADE, #13
City-St-Zip: ORLANDO, FL 32836

Title: VPD () Delete
Name: ABRAHAM, CATHIE
Address: 8755 THE ESPLANADE, #124
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: SVEN, BODE
Address: 8749 THE ESPLANADE, #36
City-St-Zip: ORLANDO, FL 32836

Title: PD (X) Change () Addition
Name: ABRAHAM, CATHIE
Address: 8755 THE ESPLANADE, #124
City-St-Zip: ORLANDO, FL 32836

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: CATHIE ABRAHAM

PRES

09/05/2009

Electronic Signature of Signing Officer or Director

Date