2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011881

FILED Feb 13, 2008 Secretary of State

Entity Name: HORIZONS AT VISTA LAKES CONDOMINIUM ASSOCIATION, INC.

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

%CURTIS BAURQUE 5955 TG LEE BLVD 8630 BUCCILLI DR., #203 #300

ORLANDO, FL 32829 ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

%CURTIS BAURQUE 5955 TG LEE BLVD #300

8630 BUCCILLI DR., #203

ORLANDO, FL 32829 ORLANDO, FL 32822

FEI Number: 75-3182028 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:

> LELAND MANAGEMENT 5955 TG LEE BLVD

300

ORLANDO, FL 32822 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: GARY VAN DER LAAN 02/13/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BAURQUE, CURTIS COLON, JOAN Name: Name:

8630 BUCCILLI DR #203 Address: 8630 BUCCILLI DRIVE # 205 Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32829

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

SIRIANI, STEVE Name: SIRIANI, STEVE Name:

Address: 6335 CONTESSA DR #307 Address: 6335 CONTESSA DR #307 City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32829

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

VELICKOVICH, SONIA BOSINGER, SONIA Name: Name:

8710 SARATOGA INLET DR #301 8710 SARATOGA INLET DR #301 Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32829

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

SANCHEZ, EFRAIN Name: Name: 8630 BUCCILI DR #305 Address: Address: ORLANDO, FL 32829 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

RUIZ, CARLOS H Name: Name: 6265 CONTESSA DRIVE, #304 Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip:

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: GARY VAN DER LAAN D 02/13/2008