## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000003278

FILED Jan 09, 2009 Secretary of State

Entity Nan	ie: VISTA GRA	ANDE HOMEOWNERS' ASSOC	CIATION, INC.		
Current Principal Place of Business:			New Principal Place	of Business:	
1135 EAST CLERMON	AVENUE T, FL 34711				
Current Mailing Address:			New Mailing Address	<b>s:</b>	
1135 EAST CLERMON	AVENUE T, FL 34711				
FEI Number:	34-1978512	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:					
LADD, DAL 1135 EAST CLERMON		US			
The above in the State	named entity su of Florida.	bmits this statement for the pur	pose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E:				
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () C LADD, DALE J 1135 EAST AVEN CLERMONT, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () C LADD, NANCY 1135 EAST AVEN CLERMONT, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () E LADD, DARRYL 1135 EAST AVEN CLERMONT, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: DALE J. LADD P 01/09/2009