

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004787

FILED
Apr 25, 2008
Secretary of State

Entity Name: BOCA LAGO AT VIVANTE I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1532 RIO DENEIRO AVE
PUNTA GORDA, FL 33983

New Principal Place of Business:

1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983

Current Mailing Address:

PO BOX 380758
MURDOCK, FL 339380758

New Mailing Address:

PO BOX 380758
MURDOCK, FL 33938

FEI Number: 20-4901300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WISHARD, KRISTINE
1532 RIO DENEIRO AVE
PUNTA GORDA, FL 33983 US

Name and Address of New Registered Agent:

WISHARD, KRISTINE
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 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:

04/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FEDER, PATRICIA
Address: 94 VIVANTE BLVD., #9431
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPD () Delete
Name: RICE, PATRICIA
Address: 94 VIVANTE BLVD., #9447
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD () Delete
Name: RICE, RAYMOND
Address: 94 VIVANTE BLVD., #9447
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD (X) Delete
Name: FEDDER, KENNETH
Address: 94 VIVANTE BLVD., #9431
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ACKERMAN, MARK
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33938

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

Title: STD (X) Change () Addition
Name: RICE, RAYMOND
Address: 94 VIVANTE BLVD., #9447
City-St-Zip: PUNTA GORDA, FL 33950

Title: () Change () Addition
Name:
Address:
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: MARK ACKERMAN

PD

04/25/2008

Electronic Signature of Signing Officer or Director

Date