2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# N06000008124

Entity Name: TERRA VISTA VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

2907 BAY TO BAY BLVD. SUITE 301
TAMPA, FL 33629

New Principal Place of Business:

11691 GATEWAY BLVD.
203
FT. MYERS, FL 33913

Current Mailing Address:

2907 BAY TO BAY BLVD. SUITE 301
TAMPA, FL 33629

New Mailing Address:

11691 GATEWAY BLVD.
203
FT. MYERS, FL 33913

FEI Number: 20-5327809 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

VISION ASSOCIATION MANAGMENT
11691 GATEWAY BLVD.
203
FT. MYERS, FL 33913 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: REBECCA L. SARVER 03/24/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HILL, JEFF
Address: 2907 BAY TO BAY BLVD. SUITE 301
City-St-Zip: TAMPA, FL 33629

Title: VPD ( ) Delete
Name: BENSON, STEVE
Address: 13130 WESTLINES TERR. #4
City-St-Zip: WEST PALM BEACH, FL 33413

Title: STD ( ) Delete
Name: TORIAN, RUSS
Address: 2904 BAY TO BAY BLVD. #301
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TELFORD, LORRAINE
Address: 11691 GATEWAY BLVD., # 203
City-St-Zip: FT. MYERS, FL 33913

Title: VPD (X) Change ( ) Addition
Name: GERTSLE, IRIS
Address: 11691 GATEWAY BLVD. #203
City-St-Zip: FT. MYERS, FL 33913

Title: STD (X) Change ( ) Addition
Name: POTTER, DEAN
Address: 11691 GATEWAY BLVD., #203
City-St-Zip: FT. MYERS, FL 33913

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: LORRAINE TELFORD PD 03/24/2009
Electronic Signature of Signing Officer or Director Date