


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N06000008226 1. Entity Name TERRA VISTA CONDOMINIUM ASSOCIATION, INC.	
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FILED

08 MAR 24 AM 8:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 2907 BAY TO BAY BLVD STE 301 TAMPA, FL 33629	Mailing Address 2907 BAY TO BAY BLVD STE 301 TAMPA, FL 33629
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

03062008 Chg-NP CR2E037 (12/06)

4. FEI Number 20-5354192	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS

TITLE	NAME	<input type="checkbox"/> Delete
PD	HILL, JEFF	<input type="checkbox"/>
STREET ADDRESS	2907 BAY TO BAY BLVD STE 301	
CITY-ST-ZIP	TAMPA, FL 33629	
VD	BENSON, STEVE	<input type="checkbox"/>
STREET ADDRESS	13130 WESTLINKS TERR #4	
CITY-ST-ZIP	FORT MYERS, FL 33913	
STD	WOSTER, LENNY	<input type="checkbox"/>
STREET ADDRESS	2907 BAY TO BAY BLVD STE 301	
CITY-ST-ZIP	TAMPA, FL 33629	
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	400121515324	
	03/28/08--01015--010 **61.25	
STD	RUSS TORIAN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	SAME	
CITY-ST-ZIP		
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Jeff Hill** 3/10/08 0138259200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #