2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003288

FILED Mar 06, 2009 Secretary of State

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

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

1532 RIO DE JANEIRO AVE. PUNTA GORDA, FL 33983

Current Mailing Address: New Mailing Address:

PO BOX 380758 MURDOCK, FL 339380758

FEI Number: 20-8754041 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:

HATHAWAY & REYNOLDS, PA

115 PROFESSIONAL DRIVE

SUITE 101

PONTE VEDRA BEACH, FL 32082 US

THE GATEWAY GROUP

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: KRISTINE WISHARD 03/06/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: BOVE, GABRIEL M Name: BOVE, GABRIEL M

Address: 4300 MARSH LANDING BLVD SUITE 202
City-St-Zip: JACKSONVILLE BEACH, FL 32250
Address: 4300 MARSH LANDING BLVD SUITE 202
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

Name: YODER, JAMES S Name: YODER, JAMES S

Address: 4300 MARSH LANDING BLVD SUITE 202 Address: 4300 MARSH LANDING BLVD SUITE 202 City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250

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

 Name:
 BOVE, PHYLLIS
 Name:

 Address:
 4300 MARSH LANDING BLVD SUITE 202
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 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: GABRIEL BOVE PD 03/06/2009