

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000005421

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** N VISION COMMUNITIES, INC.

**Current Principal Place of Business:**

681 EVERGREEN STREET NE  
PALM BAY, FL 32907

**New Principal Place of Business:**

560 HERON DRIVE  
MERRITT ISLAND, FL 32952 US

**Current Mailing Address:**

PO BOX 164  
MELBOURNE, FL 329020164

**New Mailing Address:**

PO BOX 164  
MELBOURNE, FL 32902 US

**FEI Number:** 26-2740800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DIAMOND HOUSING PARTNERS, LLC  
1101 W HIBISCUS BOULEVARD  
SUITE 204  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

STRAKA, CHRISTOPHER J  
560 HERON DRIVE  
MERRITT ISLAND, FL 32952 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: CHRISTOPHER J. STRAKA

04/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ABRAMS, JAY  
Address: PO BOX 164  
City-St-Zip: MELBOURNE, FL 32902 US

Title: D  
Name: STRAKA, JUNE A  
Address: PO BOX 164  
City-St-Zip: MELBOURNE, FL 32902 US

Title: D  
Name: SANDELL, RENEE  
Address: PO BOX 164  
City-St-Zip: MELBOURNE, FL 32902 US

Title: D  
Name: PERSIE, JOSEPH  
Address: PO BOX 164  
City-St-Zip: MELBOURNE, FL 32902 US

Title: D  
Name: STRAKA, CHRISTOPHER J  
Address: PO BOX 164  
City-St-Zip: MELBOURNE, FL 32902 US

I hereby 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 all other like empowered.

SIGNATURE: CHRISTOPHER J. STRAKA

D

04/25/2011

Electronic Signature of Signing Officer or Director

Date