

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11573

FILED  
Feb 19, 2010  
Secretary of State

**Entity Name:** VIZCAYA AT PALM-AIRE ASSOCIATION, INC.

**Current Principal Place of Business:**

3500 GATEWAY DR  
STE 202  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

3500 GATEWAY DR  
STE 202  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 59-2710019

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CALATCHI, RALPH DR.  
3500 GATEWAY DR  
STE 202  
POMPANO BEACH, FL 33069 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CALATCHI, R. DR.  
Address: 3500 GATEWAY DR., STE. 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VP  
Name: ROMEO, RANDOLPH  
Address: 3500 GATEWAY DR., STE. 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D  
Name: BIAFORA, MARTIN  
Address: 3500 GATEWAY DR., STE 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D  
Name: CORSON, LEE  
Address: 3500 GATEWAY DR STE 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D  
Name: LANDES, MARTIN  
Address: 3500 GATEWAY DR., STE. 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D  
Name: MCCONNELL, J DR  
Address: 3500 GATEWAY DR, STE 202  
City-St-Zip: POMPANO BEACH, FL 33069

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: DR. RALPH CALATCHI

PRES

02/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date