## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13746

FILED Jan 23, 2009 Secretary of State

Entity Name: VIZCAYA LAKES HOMEOWNER'S ASSOCIATION, INC.

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

1520 ROYAL PALM SQ BLVD 1520 ROYAL PALM SQ BLVD

STE 210 STE 320

FORT MYERS, FL 33919 US FORT MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

1520 ROYAL PALM SQ BLVD 1520 ROYAL PALM SQ BLVD

STE 210 STE 320

FORT MYERS, FL 33919 US FORT MYERS, FL 33919 US

FEI Number: 65-0087666 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:

ADLER, STEVEN P
1520 ROYAL PALM SQ BLVD
STE 210
FORT MYERS, FL 33919 US

ADLER, STEVEN P
1520 ROYAL PALM SQ BLVD
STE 320
FORT MYERS, FL 33919 US

ADLER, STEVEN P
1520 ROYAL PALM SQ BLVD
STE 320
FORT MYERS, FL 33919 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: STEVEN P. ADLER 01/23/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ADLER, STEVEN P Name: ADLER, STEVEN P

Address: 1520 ROYAL PALM SQ BLVD, STE 210 Address: 1520 ROYAL PALM SQ BLVD, STE 320

City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33919

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RUBIN, DAVID C
 Name:

 Address:
 31000 NORTHWESTERN HWY, STE 220
 Address:

 City-St-Zip:
 FARMINGTON, MI 48334
 City-St-Zip:

Title: STD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SCHNEIDER, MARK
 Name:

 Address:
 4052 HOLLIS AVE
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33953
 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: STEVEN P. ADLER MM 01/23/2009

Electronic Signature of Signing Officer or Director

Date