2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17327

FILED Jan 22, 2008 Secretary of State

Entity Name: VISTA SQUARE ASSOCIATION, INC.

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

1611 BANNING BEACH ROAD TAVARES, FL 327782024

Current Mailing Address: New Mailing Address:

1611 BANNING BEACH ROAD TAVARES, FL 327782024

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

MCNAMARA, TODD A
1611 BANNING BEACH RD
TAVARES, FL 32778 US

MCNAMARA, TODD A
1611 BANNING BEACH RD
TAVARES, FL 32778 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: TODD A MCNAMARA 01/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:PD () DeleteTitle:PD (X) Change () AdditionName:MCNAMARA, TODDName:MCNAMARA, TODD AAddress:1611 BANNING BEACH RDAddress:1611 BANNING BEACH RD

Address: 1611 BANNING BEACH RD Address: 1611 BANNING BEACH RD

City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: VTD () Delete Title: () Change () Addition Name: STARK, KENNETH MD Name:

Address: 1613 BANNING BEACH RD Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BRYAN, PAUL
 Name:

 Address:
 1619 BANNING BEACH RD
 Address:

 City-St-Zip:
 TAVARES, FL 32778
 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: TODD A. MCNAMARA PD 01/22/2008