2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32964

FILED Mar 24, 2009 Secretary of State

Entity Name: VISTANA FOUNTAINS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 13800 STATE ROAD 535 ORLANDO, FL 328216350 US **Current Mailing Address: New Mailing Address:** P.O. BOX 22197 9002 SAN MARCO COURT LAKE BUENA VISTA, FL 328302197 US ORLANDO, FL 32819 US FEI Number: 59-2954018 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: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KENNY, MICHAEL Name: Name: 32 MAPLE MOOR LANE Address: Address: City-St-Zip: CORTLANDT MANOR, NY 10567 City-St-Zip: Title: VD () Delete Title: () Change () Addition FETTER, JEFFREY Name: Name: Address: 507 PLUM ST, SUITE 300 Address: City-St-Zip: SYRACUSE, NY 13204 City-St-Zip: Title: PD() Delete Title: () Change () Addition CUSANO, LOUIS Name: Name: 740 STILL HILL ROAD Address: Address: City-St-Zip: HAMDEN, CT 06518 City-St-Zip: Title: SD () Delete Title: () Change () Addition DEVILBISS, JOE Name: Name: 500 GRACETON ROAD Address: Address: City-St-Zip: FAWN GROVE, PA 17321 US City-St-Zip: Title: () Delete Title: () Change () Addition SACKS, BERNARD Name: Name: 522 SHORE ROAD APT. 3BB Address: Address: City-St-Zip: LONG BEACH, NY 11561 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: JOSEPH DEVILBRISS SD 03/24/2009