2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N93000002765

RT FILED Apr 18, 2008 Secretary of State

Entity Nar	me: VIZCAYA	VILLAS HOMEOWNERS' AS	SOCIATION	N, INC.		
Current Principal Place of Business:				New Principal Place of Business:		
INNOVATIVE PROPERTY MGMT CORP 1532 JACKSON ST FORT MYERS, FL 33901				C/O SILVERCRESTED MANAGEMENT LLC 3440 MARINATOWN LANE #203 NORTH FORT MYERS, FL 33903		
Current Mailing Address:				New Mailing Address:		
INNOVATIVE PROPERTY MGMT CORP 1532 JACKSON ST FORT MYERS, FL 33901				C/O SILVERCRESTED MANAGEMENT LLC P.O. BOX 1848 FORT MYERS, FL 33902		
FEI Number:	: 65-0508823	FEI Number Applied For ()	FEI Numb	er Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
BAXTER, LINDA S C/O INNOVATIVE PROPERTY MGMT 1532 JACKSON ST FORT MYERS, FL 33901 US				SILVERCRESTED MANAGEMENT LLC 3440 MARINATOWN LANE #203 NORTH FORT MYERS, FL 33903 US		
	named entity s e of Florida.	submits this statement for the p	purpose of o	changing its registe	red office or registered agent, or both,	
SIGNATURE: LEE J. VAN TILBURG					04/18/2008	
	Electror	ic Signature of Registered Age	ent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	PD () ISTIN, JEROME 3821-5 SCHOO FORT MYERS,	LHOUSE RD E	N A	ritle: lame: kddress: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:				ïtle: lame: \ddress: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () TERRELL, JOA 3833-1 SCHOO FORT MYERS,	LHOUSE RD E	۸ A	ïtle: lame: \ddress: \ity-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:				ritle: lame: kddress: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () MARTIN, BRET 3825-1 SCHOO FORT MYERS,	LHOUSE RD E	N A	itte: lame: kddress: city-St-Zip:	() Change () Addition	

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: JEROME ISTIN PD 04/18/2008