2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002765

FILED Feb 20, 2012 Secretary of State

Entity Name: VIZCAYA VILLAS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O SILVERCRESTED MANAGEMENT LLC 3436 MARINATOWN LANE 1ST FL UNIT 4 NORTH FORT MYERS, FL 33903 C/O SILVERCRESTED MANAGEMENT LLC 1490 NE PINE ISLAND ROAD 8D

CAPE CORAL, FL 33909

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Current Mailing Address:

New Mailing Address:

PO BOX 1848

FORT MYERS, FL 33902

FEI Number: 65-0508823

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SILVERCRESTED MANAGEMENT LLC 3436 MARINATOWN LANE SILVERCRESTED MANAGEMENT LLC 1490 NE PINE ISLAND ROAD

1ST FL UNIT 4 NORTH FORT MYERS, FL 33903 US

CAPE CORAL, FL 33909 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:

02/20/2012

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

Title: VD

Name: TERRELL, JOANNA

Address: 3833-1 SCHOOLHOUSE RD E City-St-Zip: FORT MYERS, FL 33916

Title: PD

Name: BENJAMIN, CHRISTOPHER
Address: 3821-1 SCHOOLHOUSE RD EAST
City-St-Zip: FORT MYERS, FL 33916

Title: SD

Name: SURLIUGA, RONALD

Address: C/O 6358 OLD MAHOGANY CT.

City-St-Zip: NAPLES, FL 34109

Title: TD

Name: SCHECHTER, ANDRE

Address: 6358 OLD MAHOGANY COURT

City-St-Zip: NAPLES, FL 34109

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: MICHELLE COLLINS CAM 02/20/2012