

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003457

FILED
Apr 12, 2009
Secretary of State

Entity Name: VISTA PALMS MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

1731 NW 6TH STREET
SUITE A
GAINESVILLE, FL 32609 US

New Principal Place of Business:

2070 SW 42ND LANE
GAINESVILLE, FL 32608 US

Current Mailing Address:

PO BOX 14506
GAINESVILLE, FL 32604 US

New Mailing Address:

2070 SW 42ND LANE
GAINESVILLE, FL 32608 US

FEI Number: 59-3199371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUR, WESTON
DBA FLORIDA COMMUNITY MGMT
1731 NW 6TH STREET SUITE A
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

NAYBOR, INC.
2070 SW 42ND LANE
GAINESVILLE, FL 32608 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: CRAIG PLEDGER

04/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCAULEY, DOROTHY
Address: 6202 NW 36 DR.
City-St-Zip: GAINESVILLE, FL 32653

Title: ST () Delete
Name: LARSEN, INGEBORG
Address: 6040 NW 36 TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: VD () Delete
Name: STERRETT, MYRA
Address: 6114 NW 36 TERRACE
City-St-Zip: GAINESVILLE, FL 32653

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: BUGOS, PENNY
Address: 6126 NW 36TH DRIVE
City-St-Zip: GAINESVILLE, FL 32653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MONACO, MARY
Address: 6118 NW 36TH DRIVE
City-St-Zip: GAINESVILLE, FL 32653

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: CRAIG PLEDGER

CAM

04/12/2009

Electronic Signature of Signing Officer or Director

Date