

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000081

FILED
Apr 13, 2009
Secretary of State

Entity Name: GRANDE VISTA OF ORLANDO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5925 AVENIDA VISTA
ORLANDO, FL 32821 US

New Principal Place of Business:

Current Mailing Address:

% RESORT OPERATIONS
6649 WESTWOOD BLVD, SUITE 500
ORLANDO, FL 32821 US

New Mailing Address:

FEI Number: 59-3359241 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: PERICOLOSI, MELISA
Address: 268 AUTUMN STREET
City-St-Zip: MANCHESTER, CT 06040

Title: VP () Delete
Name: SHONKWILER, JAMES A
Address: 6649 WESTWOOD BLVD, STE. 500
City-St-Zip: ORLANDO, FL 32821

Title: T () Delete
Name: CLARKSON, TOM
Address: 1713 BENTBROOK DRIVE
City-St-Zip: CHAMPAIGN, IL 61822

Title: S () Delete
Name: MCSWEEN, JOHN
Address: 12834 COUNTRY RIDGE
City-St-Zip: SAN ANTONIO, TX 78216

Title: D () Delete
Name: CHRISTENSEN, LAVAR
Address: 12308 SOUTH RALEIGH COURT
City-St-Zip: DRAPER, UT 84020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: LANA J CULLUM

SPS

04/13/2009

Electronic Signature of Signing Officer or Director

_____ Date