

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 30, 2009
Secretary of State

DOCUMENT# N96000003559

Entity Name: VILLAS DE VIZCAYA HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2770 BRICKELL CT
MIAMI, FL 33129**New Principal Place of Business:****Current Mailing Address:**2770 BRICKELL CT
MIAMI, FL 33129**New Mailing Address:****FEI Number:** 65-0721505**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALMANZAR, RAFAEL A
2800 NW 44TH ST
OAKLAND PARK, FL 33309 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:** PD () Delete
Name: URIBE, CLAUDIA
Address: 2770 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** VPAS () Delete
Name: VECCHIO, RICHARD
Address: 2765 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** D () Delete
Name: VECCHIO, RICHARD
Address: 2765 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** STD () Delete
Name: ZANETTI, INES
Address: 2755 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** STD (X) Change () Addition
Name: URIBE, CLAUDIA
Address: 2770 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** D (X) Change () Addition
Name: VECCHIO, RICHARD
Address: 2765 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** VPD (X) Change () Addition
Name: MONTMAYOR, RODRIGO
Address: 2735 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** PD (X) Change () Addition
Name: BLINDER, HYE
Address: 2725 BRICKELL CT
City-St-Zip: MIAMI, FL 33129**Title:** D () Change (X) Addition
Name: GIARDINELLA, BEATRICE
Address: 2745 BRICKELL CT.
City-St-Zip: MIAMI, FL 33129

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: CLAUDIA URIBE

ST

04/30/2009

Electronic Signature of Signing Officer or Director

Date