

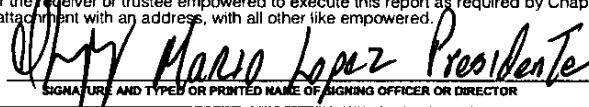


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2008 8:00 am
Secretary of State

05-16-2008 90024 041 ****70.00

DOCUMENT # N96000003911					
1. Entity Name VISTA ALEGRE TOWNHOMES VILLAS PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business % COURTESY PROPERTY MANAGEMENT, INC. 13250 S.W. 135TH AVENUE MIAMI, FL 33186			Mailing Address % COURTESY PROPERTY MANAGEMENT, INC. 13250 S.W. 135TH AVENUE MIAMI, FL 33186		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0718062	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
			Name Michael Halberg, Esq.		
			Street Address (P.O. Box Number is Not Acceptable) 10800 BISCAYNE BLVD.		
			Suite 988		
			City Miami		
			FL Zip Code 33161		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: 				DATE: 4/24/08	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)				DATE	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAMS, BARRON		NAME	LOPEZ, MARIO	
STREET ADDRESS	15239 SW 134 COURT #1304		STREET ADDRESS	15531 SW 133 PL. # 703	
CITY-ST-ZIP	MIAMI, FL 33177		CITY-ST-ZIP	MIAMI FL 33177	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRETTO, AMAURY		NAME	SARRIA, JUAN	
STREET ADDRESS	13446 SW 153 TERR #2106		STREET ADDRESS	13318 SW 152 ST. # 3207	
CITY-ST-ZIP	MIAMI, FL 33177		CITY-ST-ZIP	MIAMI FL 33177	
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MIRANDA, ANA C FONSECA		NAME	McLeod, NADIA	
STREET ADDRESS	15510 SW 133 PL #2506		STREET ADDRESS	13407 SW 154 ST. # 2308	
CITY-ST-ZIP	MIAMI, FL 33177		CITY-ST-ZIP	MIAMI FL 33177	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROMANIUK, JUANA		NAME	SALAZAR, AdIELA	
STREET ADDRESS	25550 SW 152 AVE		STREET ADDRESS	15510 SW 133 PL. #2504	
CITY-ST-ZIP	HOMESTEAD, FL 33032		CITY-ST-ZIP	MIAMI FL 33177	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PEREZ, JERRY		NAME	YESQUEN, Eduardo	
STREET ADDRESS	13302 SW 152 ST #3001		STREET ADDRESS	15250 SW 134 PL. #104	
CITY-ST-ZIP	MIAMI, FL 33177		CITY-ST-ZIP	MIAMI FL 33177	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 				DATE: 4-21-08	
Signature and typed or printed name of signing officer or director				Date	