

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003911

FILED  
Apr 01, 2010  
Secretary of State

**Entity Name:** VISTA ALEGRE TOWNHOMES VILLAS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

EXCELLENT PROPERTY MANAGEMENT  
6955 NW 77TH AVE. STE 401  
MIAMI, FL 33166

**New Principal Place of Business:**

THE CONTINENTAL GROUP INC.  
6805 BLUE LAGOON DR. - SUITE 310  
MIAMI, FL 33126

**Current Mailing Address:**

EXCELLENT PROPERTY MANAGEMENT  
6955 NW 77TH AVE. STE 401  
MIAMI, FL 33166

**New Mailing Address:**

THE CONTINENTAL GROUP INC.  
6805 BLUE LAGOON DR. - SUITE 310  
MIAMI, FL 33126

FEI Number: 65-0718062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EISINGER, DENNIS J ESQ  
EISINGER BROWN LEWIS & FRANKEL, P A  
4000 HOLLYWOOD BLVD., STE 265-S  
HOLLYWOOD, FL 33021 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  
Name: LOPEZ, MARIO  
Address: 15531 SW 133 PL #703  
City-St-Zip: MIAMI, FL 33177

Title: VP/D  
Name: SALAZAR, ADIELA  
Address: 15510 SW 133 PL # 2504  
City-St-Zip: MIAMI, FL 33177

Title: SD  
Name: MCLEOD, NADIA  
Address: 13407 SW 154 ST #2308  
City-St-Zip: MIAMI, FL 33177

Title: TD  
Name: VILLAMAR DE RENDON, JENNY  
Address: 13443 SW 152 LN # 1603  
City-St-Zip: MIAMI, FL 33177

Title: D  
Name: SARRIA, JUAN  
Address: 13318 SW 152 ST # 3207  
City-St-Zip: MIAMI, FL 33177

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: MARIO LOPEZ

PRE

04/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date