

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004683

FILED
Apr 30, 2009
Secretary of State

Entity Name: VISCAYA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7 FLORIDA PARK DRIVE NORTH
SUITE C
PALM COAST, FL 32137 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 352041
PALM COAST, FL 32135 US

New Mailing Address:

FEI Number: 59-3421711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANNON, FRED JR
PALM COAST PROPERTY MANAGEMENT
7 FLORIDA PARK DRIVE N., SUITE C
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

ANNON, FRED JR
SOUTHERN STATES MANAGEMENT GRP
7 FLORIDA PARK DRIVE N., SUITE C
PALM COAST, FL 32137 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: FRED ANNON, JR.

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DESIMINI, WILLIAM
Address: POST OFFICE BOX 352041
City-St-Zip: PALM COAST, FL 32135

Title: SD () Delete
Name: PIERCE, CLAUDIA
Address: PO BOX 352041
City-St-Zip: PUTNAM HALL, FL 32185

Title: TD (X) Delete
Name: KECK, PAUL
Address: POST OFFICE BOX 352041
City-St-Zip: PALM COAST, FL 32135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DESIMINI, WILLIAM
Address: POST OFFICE BOX 352041
City-St-Zip: PALM COAST, FL 32135

Title: D (X) Change () Addition
Name: PIERCE, CLAUDIA
Address: PO BOX 352041
City-St-Zip: PUTNAM HALL, FL 32185

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: CLAUDIA PIERCE

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date