

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001495

FILED  
Apr 22, 2010  
Secretary of State

**Entity Name:** PALM VISTA CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O AMERICAN CONDO MGMT  
615 CAPE CORAL PKWY W 103  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

C/O AMERICAN CONDO MGMT  
615 CAPE CORAL PKWY W 103  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 65-0864992

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KASE, SUSAN CAM  
615 CAPE CORAL PKWY W 103  
CAPE CORAL, FL 33914 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: D  
Name: DILELLA, CRESCENZO C  
Address: 4041 SE 11TH PLACE, UNIT 105  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP  
Name: MAHER, THOMAS D  
Address: 4041 SE 117TH FL #101  
City-St-Zip: CAPE CORAL, FL 33904

Title: T  
Name: PEDERSEN, LISA  
Address: 4041 SE 11TH PLACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: SD  
Name: BEACH, MOLLY  
Address: 4041 SE 11TH PL 207  
City-St-Zip: CAPE CORAL, FL 33904

Title: PD  
Name: BLACKBURN, RICHARD  
Address: 4041 SE 11TH PL 202  
City-St-Zip: CAPE CORAL, FL 33904

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: RICHARD BLACKBURN

P

04/22/2010

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

\_\_\_\_\_  
Date