2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002671

FILED Mar 19, 2009 Secretary of State

Entity Name: VISTA ALEGRE TOWNHOMES VILLAS STAGE IV CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal	New Principal Place of Business:	
% COURTESY PROPERTY MANAGEMENT, INC. 13250 S.W. 135TH AVENUE MIAMI, FL 33186			6955 NW 77 A	EXCELLENT PROPERTY MANAGER 6955 NW 77 AVE. STE. 401 MIAMI, FL 33166	
Current Mailing Address:			New Mailing A	New Mailing Address:	
% COURTESY PROPERTY MANAGEMENT, INC. 13250 S.W. 135TH AVENUE MIAMI, FL 33186			6955 NW 77 A	% EXCELLENT PROPERTY MANAGER 6955 NW 77 AVE. STE. 401 MIAMI, FL 33166	
FEI Number	: 65-0846456	FEI Number Applied For ()	FEI Number Not Applicabl	e () Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Add	lress of New Registered Agent:	
The above	e of Florida. ´ RE:	·	, , ,	gistered office or registered agent, or both,	
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	SALAZAR, AD	33RD PLACE, STE 2504	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VILLAMAR, JE	4 STREET #2411	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SANTOMAURI) Delete ASCANIO, TANIA T 3 PLACE #2511 177	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MESTRIN, QU	4 STREET #2402	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (RODRIGUEZ, 13448 SW 15 MIAMI, FL 33	4 ST 2404	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ADIELA SALAZAR PD 03/19/2009