

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004935

FILED
Apr 30, 2009
Secretary of State

Entity Name: SIERRA VISTA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

14220 E. LA SEDONA CIR
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

C/O FLORIDA ONE PROPERTY MANAGEMENT
P O BOX 880269
BOCA RATON, FL 33488

New Mailing Address:

FEI Number: 65-0916861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDALL ROGER & ASSOCIATES, P.A.
621 NW 53 ST.
SUITE 300
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

FLORIDA ONE PROPERTY MANAGEMENT
9825 MARINA BLVD
SUITE 100
BOCA RATON, FL 33428 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: WILLIAM RUSSO

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, BARBARA
Address: 14211 W. LASEDDNA
City-St-Zip: DELRAY BEACH, FL 33484

Title: SD () Delete
Name: VOLPE, GERI
Address: 14215 W LA SEDONA CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

Title: T () Delete
Name: RAPISARDI, GINA
Address: 5028 N. LASEDONA
City-St-Zip: DELRAY BEACH, FL 33484

Title: VP () Delete
Name: WASILEWSKI, KASIA
Address: 14211 W. LA SEDONA
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: OLSON, TOM
Address: 5117 S. LA SELDONA
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM RUSSO

MGR

04/30/2009

Electronic Signature of Signing Officer or Director

Date