## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000005780

FILED Feb 09, 2007 Secretary of State

Entity Name: SIERRA VISTA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2582 S. MAGUIRE RD., #318 OCOEE, FL 34761

Current Mailing Address: New Mailing Address:

2582 S. MAGUIRE RD., #318 PO BOX 783367

OCOEE, FL 34761 WINTER GARDEN, FL 34778

FEI Number: 59-3536621 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SOLOMON, SPENCER R

113 DESIREE AURORA STREET

WINTER GARDEN, FL FL34787 US

SOLOMON, SPENCER R

14443 PRUNNING WOOD PLACE

WINTER GARDEN, FL FL34787 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: SPENCER SOLOMON 02/09/2007

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: STD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 RIVENBURG, JERRY
 Name:
 COBB, DICK

 Address:
 1780 PRESIDIO DR
 Address:
 132 PACIFIC AVE

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition Name: CHIARELLA, DON Name: CINTRON, PEDRO

 Name:
 CHIARELLA, DON
 Name:
 CINTRON, PEDRO

 Address:
 144 LOMBARD CIR
 Address:
 144 PACIFIC AVE

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

Title: PD ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 MOODY, DON
 Name:
 PERSAUD, TRIB

 Address:
 1598 CHANCELLOR CT
 Address:
 1794 PRESIDO DR

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the 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: SPENCER SOLOMON RA 02/09/2007