## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000011396

Entity Name: VISTA CAPITAL, INC.

City-St-Zip:

JACKSONVILLE, FL 32246 US

FILED Jul 11, 2006 Secretary of State

Current Principal P	lace of Business:	New Principal Place	New Principal Place of Business:	
2449 FALLEN TREE DR E JACKSONVILLE, FL 32246		SUITE 8	3740 ST. JOHNS BLUFF ROAD SUITE 8 JACKSONVILLE, FL 32224	
<b>Current Mailing Ad</b>	dress:	New Mailing Address	New Mailing Address:	
2449 FALLEN TREE DR E JACKSONVILLE, FL 32246		SUITE 8	3740 ST. JOHNS BLUFF ROAD SUITE 8 JACKSONVILLE, FL 32224	
FEI Number: 05-055696	3 FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address	of Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
SAVAGE, HOWARD 2449 FALLEN TREE JACKSONVILLE, FL	DR. E			
The above named er in the State of Florida		purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Ele	ctronic Signature of Registered A	gent	Date	
	07.193(2)(b), F.S., the corporation did incing Trust Fund Contribution ( ).	not receive the prior notice.		
OFFICERS AND DI	RECTORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
· · · · · · · · · · · · · · · · · · ·	( ) Delete HOWARD W	Title: Name:	( ) Change ( ) Addition	

City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOWARD W SAVAGE II PRES 07/11/2006