

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000087886

FILED
Aug 14, 2009
Secretary of State**Entity Name:** VISTA COMMERCIAL PROPERTIES, INC.**Current Principal Place of Business:**100 VISTA ROYALE BLVD.
VERO BEACH, FL 32962 US**New Principal Place of Business:**2043 14TH AVENUE
VERO BEACH, FL 32960 US**Current Mailing Address:**2950 N 28TH TERRACE
HOLLYWOOD, FL 33020 US**New Mailing Address:****FEI Number:** 59-3219209**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ANTHONY KALLICHE, ESQUIRE
2950 N 28TH TERRACE
HOLLYWOOD, FL 33020 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: P/D () Delete
Name: ROSES, TOMAS
Address: 2950 N 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: T () Delete
Name: LANG, WENDY
Address: 2950 N 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: VP () Delete
Name: TAGUE, JOHN
Address: 100 VISTA ROYALE BLVD.
City-St-Zip: VERO BEACH, FL 32962 US

Title: VP () Delete
Name: KOEHLER, KIRK
Address: 100 VISTA ROYALE BLVD.
City-St-Zip: VERO BEACH, FL 32962

Title: VP () Delete
Name: PALMER, KERI
Address: 2870 SCHERER DR. NORTH, STE 100
City-St-Zip: ST. PETERSBURG, FL 33716

Title: S () Delete
Name: KALLICHE, ANTHONY A
Address: 2950 N 28 TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: TAGUE, JOHN
Address: 2950 N 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: D (X) Change () Addition
Name: RABIN, ROBERT
Address: 2950 N 28TH TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

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

SIGNATURE: ANTHONY A. KALLICHE

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08/14/2009

Electronic Signature of Signing Officer or Director

Date