2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000083405

Entity Name: VISTA DEL LAGO DEVELOPMENT CORP.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

3307 NORTHLAKE BLVD. 3307 NORTHLAKE BLVD.

SUITE 107 SUITE 107

WEST PALM BEACH, FL 33403 PALM BEACH GARDENS, FL 33403

Current Mailing Address: New Mailing Address:

3307 NORTHLAKE BLVD. 3307 NORTHLAKE BLVD.

SUITE 107 SUITE 107

WEST PALM BEACH, FL 33403 PALM BEACH GARDENS, FL 33403

FEI Number: 65-0533115 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:

CROSSEN, JOSEPH F
3307 NORTHLAKE BLVD. STE 107

CROSSEN, JOSEPH F
3307 NORTHLAKE BLVD. STE 107

WEST PALM BEACH, FL 33403 US PALM BEACH GARDENS, FL 33403 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: 04/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete Name: CROSSEN, JOSEPH F

Address: 3307 NORTHLAKE BLVD. STE 107
City-St-Zip: WEST PALM BEACH, FL 33403

 Title:
 D
 () Delete

 Name:
 HOWLAND, LYLE

 Address:
 66 BEACON ST.

 City-St-Zip:
 BOSTON, MA 02108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

Name: CROSSEN, JOSEPH F

Address: 3307 NORTHLAKE BLVD. STE 107 City-St-Zip: PALM BEACH GARDENS, FL 33403

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: JOSEPH F CROSSEN P 04/20/2009