FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortnam
Secretary of State
DIVISION OF CORPORATIONS

1996	arner .	DIVISION	OF CO
DOCUMENT #	P95000089	9187	(5)

VISTA PROPERTY SERVICES, INC. Principal Place of Business 5840 REDBUG LAKE ROAD SUITE 35 WINTER SPRINGS FL 32708 Mailing Address 5840 REDBUG LAKE ROAD SUITE 35 WINTER SPRINGS FL 32708					
				3. Date Incorporated or Qualified 3a. (Date of Last Report
21	ace of Business	2a. Mailing Address 26		4. FEI Number 59-3343431	Applied For
Suite, Apt. i 22	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23 Zip	Country	28		Trust Fund Contribution	Added to Fees
24	25	Ζιρ 29	Country 30	8. This corporation has liability for intangible	
	9. Name and Address of Curren	1 Registered Agent		Florida Statutes Yes No 10. Name and Address of New Registers	
1400 W Suite :	GON, CHARLES R ESQ. 7. FAIRBANKS AVENUE 203 R PARK FL 32789		82 Street Ada 83 84 City	ress (P.O. Box Number is Not Acceptable)	■ 85 Zip Code
SIGNATURE	lgrature, typed or printed name of registered agort a	nd tilk rappicadie (No	OTE Registered Agent signature require	ration submits this statement for the purpose of ord of directors. I hereby accept the appointment	changing its registered office as registered agent. I am
TILE	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	WEAVER, DENNIS R 4212 GABRIELLA LANE WINTER PARK FL 32792	□ DELETE	1.1 TITLE 1.2 NAME 1.3 STREE! ADDRESS 1.4 C/TY-ST-7.P		☐ Change ☐ Addition
TITE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, WILLIAM KEVIN 4220 GABRIELLA LANE WINTER PARK FL 32792	DELETE	2 1 TITLE 22 NAME 23 STHEFT ADDRESS 24 C(TY-ST-7)P		Change Addition
TITLE NAME STHEET ADDRESS CITY-ST-ZIP		☐ DELETE	3 1 FILLE 3 2 NAME 3 3 STREET ADDRESS 3 4 City-St-zip		☐ Change ☐ Addition
NAME STREET ADORESS CHTY-ST-ZIP		☐ DELETE	4.1 TITLE 42 NAME 43 STREET ADDRESS		☐ Change ☐ Addition
TITLE VAME STREET ADDRESS DITY-ST-ZIP		DETEIE	4.4 CHY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREEL ADDRESS 5.4 CHY-ST-ZIP		☐ Change ☐ Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP 4. I do hereby c	ertify that the information constraints	DELETE	6 1 TITLE 62 NAME 63 STREET ADDRESS	r the exemption stated in Section 119.07(3)(k), Fi	Change Addition

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE:

AGNATURE AND TYPED OF PHINTED NAME OF SIGNING OFFICER OF DIRECTOR IS & WEAVER 3/26/94 (407)677-4589