

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 753465

Entity Name: VISTA BAY CONDOMINIUM ASSOCIATION, INC.

FILED
Aug 22, 2024
Secretary of State
9424977868CC

Current Principal Place of Business:

19111 VISTA BAY DRIVE
OFFICE
INDIAN SHORES, FL 33785

Current Mailing Address:

19111 VISTA BAY DRIVE
OFFICE
INDIAN SHORES, FL 33785 US

FEI Number: 59-2446132

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WETHERINGTON HAMILTON
812 W. DR. MLK JR. BLVD
SUITE 101
TAMPA, FL 33603 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: ELLEN HIRSCH

08/22/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HOWARD, MICHAEL
Address 19111 VISTA BAY DR.
City-State-Zip: INDIAN SHORES FL 33785

Title VP
Name LARSON, GLORIA
Address 19111 VISTA BAY DR.
City-State-Zip: INDIAN SHORES FL 33785

Title DIRECTOR
Name BILBERRY, KEVIN
Address 19111 VISTA BAY DR.
City-State-Zip: INDIAN SHORES, FL 33785

Title DIRECTOR
Name SHIPP, EARL JR.
Address 19111 VISTA BAY DR.
City-State-Zip: INDIAN SHORES FL 33785

Title PRESIDENT
Name MENCHISE, NICHOLAS
Address 19111 VISTA BAY DR.
City-State-Zip: INDIAN SHORES FL 33785

Title SECRETARY
Name FRIEDRICH, JR., WILLIAM
Address 19111 VISTA BAY DR.
City-State-Zip: INDIAN SHORES FL 33785

Title TREASURER
Name RIHERD, TOM
Address 19111 VISTA BAY DRIVE
City-State-Zip: INDIAN SHORES FL 33785

I hereby 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 all other like empowered.

SIGNATURE: NICHOLAS MENCHISE

PRESIDENT

08/22/2024

Electronic Signature of Signing Officer/Director Detail

Date