

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004698

**Entity Name:** VISTANA CASCADES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13800 STATE ROAD 535  
ORLANDO, FL 32821

**Current Mailing Address:**

9002 SAN MARCO COURT  
ORLANDO, FL 32819

**FEI Number: 59-3463780**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TD  
Name PHILLIPS, DAVID S  
Address 111 CARYS TRACE  
City-State-Zip: YORKTOWN VA 23693

Title VPD  
Name SANDERS, WALLACE  
Address 1924 NORTHCREST CIRCLE  
City-State-Zip: AMES IA 50010

Title PRESIDENT  
Name GILL, JOSEPH  
Address 122 STAR VIEW LANE  
City-State-Zip: CRANBERRY TWP PA 16066

Title VP  
Name OLIVERI, THOMAS  
Address 19 ARCADIA DRIVE  
City-State-Zip: DIX HILLS NJ 11746

Title SECRETARY  
Name HIND, THOMAS  
Address 1061 HUGUENOT AVE.  
City-State-Zip: STATEN ISLAND NY 10312

*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: THOMAS HIND**

**SECRETARY**

**01/09/2015**

Electronic Signature of Signing Officer/Director Detail

Date