

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702572

FILED  
Jan 24, 2010  
Secretary of State

**Entity Name:** VENETIAN SHORES HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1002 VENETIAN BLVD  
ISLAMORADA, FL 330366560

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1732  
ISLAMORADA, FL 330366560

**New Mailing Address:**

FEI Number: 59-1718478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARGULIES, STANLEY  
1002 VENETIAN BLVD  
ISAMORADA, FL 33036 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: PD  
Name: MARGULIES, STAN  
Address: 100 VENETIAN BLVD  
City-St-Zip: ISLAMORADA, FL 33036

Title: VPD  
Name: ALTER, BARRY  
Address: 110 BAYVIEW ISLE DRIVE  
City-St-Zip: ISLAMORADA, FL 33036

Title: SD  
Name: PONENTI-SIGEL, SUE  
Address: 105 GLARDINO DR  
City-St-Zip: ISLAMORADA, FL 33036

Title: TD  
Name: ZIOMEK, DIANE  
Address: 101 MILANO DR  
City-St-Zip: ISLAMORADA, FL 33036

Title: D  
Name: AYALA, SERGIO  
Address: 112 VILLABELLA DRIVE  
City-St-Zip: ISLAMORADA, FL 33036

Title: D  
Name: BRAY, TOM  
Address: 119 LEONI DRIVE  
City-St-Zip: ISLAMORADA, FL 33036

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: DIANE ZIOMEK

TD

01/24/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date