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Feb 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 717766 (0)

1. Corporation Name
VENICE SANDS APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
633 ALHAMBRA RD. VENICE FL 34285	633 ALHAMBRA RD. VENICE FL 34285

3. Date Incorporated or Qualified: 12/22/1969

4. FEI Number: 59-1308495 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WILSON, MARGARET M 7559 PARRISH STREET N. PORT FL 34287	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Margaret M. Wilson Margaret M. Wilson 2/19/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	AUSTIN, ALAN	1.2 NAME	
STREET ADDRESS	633 ALHAMBRA ROAD #308	1.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE, FL 00000	1.4 CITY-ST-ZIP	
TITLE	S ☒ DELETE	2.1 TITLE	S ☒ Change ☐ Addition
NAME	MOE, LOU	2.2 NAME	Mary Catherine Sweat
STREET ADDRESS	724 ELDORADO DR.	2.3 STREET ADDRESS	126 N. Harbison Ave.
CITY-ST-ZIP	VENICE FL 34284	2.4 CITY-ST-ZIP	Indianapolis, IN 46219
TITLE	D ☒ DELETE	3.1 TITLE	T ☒ Change ☐ Addition
NAME	HAGUE, RALPH	3.2 NAME	Eve Katramados
STREET ADDRESS	633 ALHAMBRA ROAD #901	3.3 STREET ADDRESS	633 Alhambra Rd. #407
CITY-ST-ZIP	VENICE FL	3.4 CITY-ST-ZIP	Venice, FL 34285
TITLE	T ☒ DELETE	4.1 TITLE	VP ☒ Change ☐ Addition
NAME	GILES, LYDIA	4.2 NAME	G. Frank Pittman
STREET ADDRESS	633 ALHAMBRA RD 1001	4.3 STREET ADDRESS	1830 Faxcroft Lane #604
CITY-ST-ZIP	VENICE FL	4.4 CITY-ST-ZIP	Allison Park, PA 15101
TITLE	V ☒ DELETE	5.1 TITLE	P ☒ Change ☐ Addition
NAME	STEINER, ROBERT	5.2 NAME	Carol Ann Becknell
STREET ADDRESS	P O BOX 29104	5.3 STREET ADDRESS	118 Perry Lane
CITY-ST-ZIP	INDIANAPOLIS IN	5.4 CITY-ST-ZIP	London, KY 40741
TITLE	P ☒ DELETE	6.1 TITLE	D ☒ Change ☐ Addition
NAME	STEVENS, MARVIN	6.2 NAME	Dominick Giordano
STREET ADDRESS	633 ALHAMBRA RD, #801	6.3 STREET ADDRESS	633 Alhambra Rd. #802
CITY-ST-ZIP	VENICE FL	6.4 CITY-ST-ZIP	Venice, FL 34285

CR2E037 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Margaret M. Wilson 2/19/98