2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# 717766

Entity Name: VENICE SANDS APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

633 ALHAMBRA RD.
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

633 ALHAMBRA RD.
VENICE, FL 34285

New Mailing Address:

FEI Number: 59-1308495 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILSON, MARGARET M
7559 PARRISH STREET
N. PORT, FL 34287 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: TD ( ) Delete
Name: JEFFERIES, JOHN
Address: 633 ALHAMBAA RD., #501
City-St-Zip: VENICE, FL 34285

Title: PD ( ) Delete
Name: FORTE, JOSEPH G
Address: 24500 FORTERRA DR.
City-St-Zip: WARREN, MI 48089

Title: S ( ) Delete
Name: KATRAMADOS, EVE
Address: 633 ALHAMBRA RD. #407
City-St-Zip: VENICE, FL 34285

Title: D ( ) Delete
Name: GILES, LYDIA
Address: 633 ALHAMBRA RD. #1001
City-St-Zip: VENICE, FL 34285

Title: VP ( ) Delete
Name: WILLETT, KENNETH
Address: 81 MAPLEFIELD
City-St-Zip: PLEASANT RIDGE, MI 48069

Title: D (X) Delete
Name: HARRINGTONF, JOSEPH C
Address: 633 ALHAMBRA RD., #1006
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: CLAY, BYRON J
Address: 633 ALHAMBRA RD. #601
City-St-Zip: VENICE, FL 34285

Title: P (X) Change ( ) Addition
Name: FORTE, JOSEPH G
Address: 24500 FORTERRA DR.
City-St-Zip: WARREN, MI 48089

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: G. JOSEPH FORTE P 01/06/2004

Electronic Signature of Signing Officer or Director — Date