

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717766

FILED
Jul 02, 2009
Secretary of State

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:

181 CENTER ROAD
VENICE, FL 34285

FEI Number: 59-1308495 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ARGUS MANAGEMENT OF VENICE
181 CENTER RD
VENICE, FL 34285 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: P (X) Delete
Name: HARRINGTON, JOSEPH C
Address: 54 SCHOOL ST
City-St-Zip: REHOBOTH, MA 02769

Title: D () Delete
Name: MOSS, DENNIS
Address: 633 ALAHAMBRA RD
City-St-Zip: VENICE, FL 34285

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

Title: P () Delete
Name: KATRAMADOS, EVE
Address: 633 ALAHAMBRA RD
City-St-Zip: VENICE, FL 34285

Title: TD () Delete
Name: FLICK, PETER
Address: 633 ALAHAMBRA RD
City-St-Zip: VENICE, FL 34285

Title: SD () Delete
Name: KARMA SIN, KATHY
Address: 633 ALAHAMBRA RD
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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

Title: VP (X) Change () Addition
Name: LINDA, WILLETT
Address: 633 ALAHAMBRA RD
City-St-Zip: VENICE, FL 34285

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VINNY CAMBELL

AGT

07/02/2009

Electronic Signature of Signing Officer or Director

Date