2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

VENICE FL 34285

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

633 ALHAMBRA RD.

DOCUMENT # 717766

1. Entity Name

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

633 ALHAMBRA RD.

VENICE FL 34285

VENICE SANDS APARTMENTS CONDOMINIUM ASSOCIATION,



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90246 004 ****61.25

10025747



WILSON, MAP 7559 PARRISH N. PORT FL 3

. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent					
	Name					
RGARET M H STREET	Street Address (P.O. Box Number is Not Acceptable)					
4287						
	City	FL	Zip Code			
ed entity submits this statement for the purpose of changing its registere	d office or registered agent, or both, in the State of Florida.	Lam fan	niliar with, and accept			

8. The above name the obligations of registered agent.

Country

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

Country

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing ___

\$5.00 May Be

Make Check Payable to

, ,		Trust Fund Contribution.		Added to Fees Florida Department of State			tate	
	·							
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	D	🔀 Delete	TITLE	D. mero	15 C] Change	Addition	
N AM E	AUSTIN, ALAN		NAME	JOHN JEFFR 633 ALHAMBI	ACD #50		ĺ	
STREET ADDRESS	633 ALHAMBRA ROAD #308		STREET ADDRESS	C33 ALHAMAD	CH (CN - On			
CITY-ST-ZIP	VENICE FL		CITY-ST-ZIP	VENICE, FI	34285			
TITLE	PD	☐ Delete	TITLE] Change	☐ Addition	
NAME	Forte, Joseph G		NAME					
STREET ADDRESS	24500 FORTERRA DR.		STREET ADDRESS					
CITY-ST-ZIP	WARREN MI 48089		_ City-St-zip ·	·. •	. 1			
TITLE	VP	☐ Delete	TITLE	SEC.	×	Change	☐ Addition	
NAME	KATRAMADOS, EVE		NAME					
STREET ADDRESS	633 ALHAMBRA RD. #407		STREET ADDRESS					
CITY-ST-ZIP	VENICE FL 34285		CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE) Change	☐ Addition	
NAME	GILES, LYDIA		NAME				ļ	
STREET ADDRESS	633 ALHAMBRA RD. #1001		STREET ADDRESS					
CITY-ST-ZIP	VENICE FL 34285		CITY-ST-ZIP					
TITLE	TD	☐ Delete	TITLE	VP	Ž.	Change	☐ Addition	
NAME	WILLETT, KENNETH		NAME	1.4				
STREET ADDRESS	81 MAPLEFIELD		STREET ADDRESS					
CITY-ST-ZIP	PLEASANT RIDGE MI 48069		CITY-ST-ZIP					
TITLE	D	⊠ Delete	TITLE	D	A CONTRACTOR] Change	Addition	
NAME	STEFF, MARGARET		NAME	JOSEPH C. H 633 ALHAMB	AKICINGIUM	56		
STREET ADDRESS	633 ALHAMBRA ROAD #708		STREET ADDRESS	633 ALHAMIS	KW 140 #100			
CITY-ST-ZIP	VENICE FL 34285		CITY-ST-ZIP	VENICE, FI	34285			

12. I hereby certify that the information supplied with this filling does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an appress, with all other ke ampowered.

SIGNATURE:

2-19-03