

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 16, 2012
Secretary of State

DOCUMENT# 741542

Entity Name: VENICE ACRES IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

1435 E VENICE AVE
SUITE 104-236
VENICE, FL 34292 US

New Principal Place of Business:

Current Mailing Address:

1435 E VENICE AVE
SUITE 104-236
VENICE, FL 34292 US

New Mailing Address:

FEI Number: 59-2409681 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HUTCHINSON, COLLEEN
1435 E VENICE AVE
SUITE 104-236
VENICE, FL 34292 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
Name: PROST, SAMUEL
Address: 1436 E VENICE AVE, SUITE 104-236
City-St-Zip: VENICE, FL 34292

Title: VP
Name: HUTCHINSON, COLLEEN
Address: 1436 E VENICE AVE, SUITE 104-236
City-St-Zip: VENICE, FL 34292

Title: T
Name: RANDOL, AIMEE
Address: 1436 E VENICE AVE, SUITE 104-236
City-St-Zip: VENICE, FL 34292

Title: S
Name: GRANT, PAM
Address: 1436 E VENICE AVE, SUITE 104-236
City-St-Zip: VENICE, FL 34292

Title: DIR
Name: HITT, GREGORY
Address: 1436 E VENICE AVE, SUITE 104-236
City-St-Zip: VENICE, FL 34292

Title: DIR
Name: SKAGGS, BILL
Address: 1436 E VENICE AVE, SUITE 104-236
City-St-Zip: VENICE, FL 34292

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: COLLEEN HUTCHINSON

VP

04/16/2012

Electronic Signature of Signing Officer or Director

_____ Date