

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 757754

1. Entity Name

VENETIAN VILLAS UNIT OWNERS ASSOCIATION, INC.

Principal Place of Business

105 QUAYASSISI
NEW SMYRNA BEACH FL 32169
US

Mailing Address

105 QUAYASSISI
NEW SMYRNA BEACH FL 32169
US

2. Principal Place of Business

2180 WEST SR 434

Suite, Apt. #, etc.

SUITE 5000

City & State

LONGWOOD FL

Zip

32779-5044

Country

US

3. Mailing Address

2180 WEST SR 434

Suite, Apt. #, etc.

SUITE 5000

City & State

LONGWOOD FL

Zip

32779-5044

Country

US

4. FEI Number

59-2749530

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PETERSON JR, SID C ATTY
418 CANAL ST
NEW SMYRNA BEACH FL 32168

7. Name and Address of New Registered Agent

Name
HART, JAMES W. JR.
Street Address (P.O. Box Number is Not Acceptable)
SENTRY MANAGEMENT, INC.

2180 W SR 434 STE 5000

City
LONGWOOD

FL

Zip Code
32779-5044

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

1/25/01
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CUMISKY, JOHN H
122 LAGOON CT
NEW SMYRNA BEACH FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
YOUNG, NANCY
121 LAGOON CT
NEW SMYRNA BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RIVERS, WENDELL
4749 EASTWIND ST
ORLANDO FL 32812 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BARGHINI, KENNETH E
107 LAGOON CT
NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
WORLEY, FRAN
152 BREEZWAY CT
NEW SMYRNA BEACH FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
IRONS, MARY L
170 BREEZWAY CT
NEW SMYRNA BEACH, FL 32169 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JULIAN, BETTY B
149 BREEZWAY CT
NEW SMYRNA BEACH, FL 32169 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 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 address, with all other like empowered.

SIGNATURE:

Nancy J. Young U.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-27-01

FILED
Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90098 024 ****61.25

00051628



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)