FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name 762654

(2)

VENICE DAY ADULT DARK INC.

VENICE	. DAT ADULT FARE, INC.						
Principal Place of Business		Mailing Address			,		
149 SERPENTINE DR VENICE FL 34292		149 SERPENTINE DR VENICE FL 34292					
					3. Date Incorporated or Qualified 03/30/1982	3a. Date of Las 01/26/	1995
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number	\vdash	Applied For
21		26			59-2258014	*07	Not Applicable 5 Additional
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ Fe	e Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees
Zip	Country	Zip	Country	/	8. This corporation has liability for in	ntangible tax under	s. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	egistered Agent	
			81	Name	SAME		
RUTTER, LARRY			82	Street Add	ress (P.O. Box Number is Not Acceptable	θ)	
151 SERPENTINE DR.			20	<u> </u>	#1 mm		
VENICE	FL 34292		83	'			
			84	City		FL B5	Zip Code
	(0.42.05	00 and 617 1500. Florido Ptotutos	the above	named corpo	eration submits this statement for the pure	noce of chancing it	s registered office
or rogintor	od apont or both in the State of El/	orida. Such channe was authorized	by the con	poration's boa	ard of directors. I hereby accept the appo	intment as register	ed agent. I am
familiar wi	th, and accept the obligations of, Se	ection 617.0503, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered ag	sont and title if applicable (NOTE:	Registered Ag	ent signature require	ed when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	TORS IN 12
TITLE	D	▼ 0ELETE	1 1 TITLE	T I	OT SATERIAN	⊠ Chan¢	je 🔀 Addition
NAME	KOGER, CLYDE		1.2 NAME		ZALPH PETERSON		
STREET ADDRESS	144 BAYOU DR		1.3 STRE				
CITY-ST-ZIP	VENICE FL		1.4 CITY		JENILE PL. 34292	Chang	e 🔲 Addition
TITLE	DV	DELETE	2.1 TITLE				Je 🗀 Nocition
NAME	SNYDER, SUZANNE		2.2 NAMI	1			
STREET ADDRESS	156 SERPENTINE DR.		- B	ET ADDRESS			
CITY-ST-ZIP	VENICE FL	DELETE	2. 4 CITY 3.1 TITLE		-	Chan	pe Addition
TITLE NAME	DP Rütter, Larry	C.J. Decerto	3.2 NAM			-	
STREET ADDRESS	151 SERPENTINE DR			ET ADDRESS			
	VENICE, FL 00000			-ST-ZIP			
CHY-ST-ZIP TITLE	D	DELETE	4.1 TITLE			Chan	ge Addition
NAME	BOGGS, LOUIS		4. 2 NAN	1E			
STREET ADDRESS	143 BAYOU DR.		4.3 STR8	ET ADDRESS			
CITY-S1-ZIP_	VENICE FL		4.4 CITY	-ST-ZIP		F-101	The Address
TITLE	D	DELETE	51 TITLI	1		☐ Chan	ge 🔲 Addition
NAME	SUITER, WINSTON		52 NAM				
STREET ADDRESS	153 SERPENTINE DR.			ET ADORESS			
CITY-\$1-ZIP	VENICE FL	DELETE	5.4 CITY 6.1 TITL	-ST-ZIP		☐ Chan	ge Addition
TITLE	SD CIPPE FETHER		6.1 HILL				
NAME	GIBBS, ESTHER		1	EET ADDRESS			
STREET ADDRESS	1		L	r-ST-ZIP			
CITY - S1 - ZIP	VENICE, FL 00000	ied with this filing is voluntarily furnis	bod and d	one not result	y for the exemption stated in Section 119	.07(3)(k), Florida St	atutes. I further
certify the	at the information indicated on this a	annual report or supplemental annu propration or the receiver or trustee	ai report is empowere		irate and that my signature shall have the this report as required by Chapter 617, F		
appears	in Block 12 or Block 18 Thehanged,	or of an attachment with an addre	SS.			2	(88-8399
0.5	THE WILL !	V.H.	IARR	V Q	TTER 1/13/96	941	133
SIGNA	IURE COM	7 w	OR OUDSON	<u> </u>	Date	Daytime Pi	none #

SIGNATURE AND WED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #