

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 22, 2004 08:00 AM
Secretary of State

DOCUMENT # A99000002006

1. Entity Name
THE VENICE COMPANY, LTD., LLLP



Principal Place of Business
**101 W. VENICE AVENUE, SUITE 25
VENICE, FL 34285**

Mailing Address
**101 W. VENICE AVENUE, SUITE 25
VENICE, FL 34285**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03032004 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number
65-0098212

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARTLEY, MICHAEL T
101 W. VENICE AVENUE, SUITE 25
VENICE, FL 34285**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DATE

9. Capital Contributions
as Shown on record. **\$0.00**

10. Amount of Capital Contributions
in FLORIDA to date.

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P99000051091**
NAME **VENCO MANAGEMENT, INC.**
STREET ADDRESS **101 W. VENICE AV.E, SUITE 25**
CITY-ST-ZIP **VENICE, FL 34285**

DOCUMENT #
NAME **TRAMMELL, N. JEAN**
STREET ADDRESS **418 GULF DRIVE**
CITY-ST-ZIP **VENICE, FL 34285**

DOCUMENT #
NAME **HIGMAN, CAROL A**
STREET ADDRESS **622 SOUTH WEST 23RD PLACE**
CITY-ST-ZIP **GAINESVILLE, FL 32601**

DOCUMENT #
NAME **TRAMMELL, THOMAS B**
STREET ADDRESS **418 GULF DRIVE**
CITY-ST-ZIP **VENICE, FL 34285**

DOCUMENT #
NAME **EHRHART, JEAN R TRUSTEE**
STREET ADDRESS **1348 CAPRI ISLES BOULEVARD**
CITY-ST-ZIP **VENICE, FL 34292**

DOCUMENT #
NAME **MICHAEL T. & GLADYS G. HARTLEY, TENANTS**
STREET ADDRESS **520 VALENCIA ROAD**
CITY-ST-ZIP **VENICE, FL 34285**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: *Michael T. Hartley* **MICHAEL T. HARTLEY**

3/5/04

(941) 485-8220

STAPLE HERE