

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90169 005 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N02000009338					
1. Entity Name VENETIAN BAY VILLAGES CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 4001 VENETIAN BAY DR KISSIMMEE, FL 34741		Mailing Address 4001 VENETIAN BAY DR KISSIMMEE, FL 34741			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 54-2095617	
				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TAYLOR, ROBERT 850 CONCOURSE PKWY S STE 105 MAITLAND, FL 32751				7. Name and Address of New Registered Agent Name <u>Same</u> Street Address (P.O. Box Number is Not Acceptable) City <u>FL</u> 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAMPANELLA, JAMES 4001 VENETIAN BAY DR KISSIMMEE, FL 34741 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President ☒ Change ☐ Addition James Campanella 4001 Venetian Bay Dr. Kissimmee, FL 34741		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRISTIE, MARTIN 4001 VENETIAN BAY DR KISSIMMEE, FL 34741 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary ☐ Change ☒ Addition Harold Pearl 4001 Venetian Bay Dr. Kissimmee, FL 34741		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DAY, ELSPETH 4001 VENETIAN BAY DR KISSIMMEE, FL 34741 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☐ Change ☐ Addition Elspeth Day 4001 Venetian Bay Dr. Kissimmee, FL 34741		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HAMBY, STEVE 4001 VENETIAN BAY DR KISSIMMEE, FL 34741 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition Stephen Hamby 4001 Venetian Bay Dr. Kissimmee, FL 34741		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NALLEY, DAVID 4001 VENETIAN BAY DR KISSIMMEE, FL 34741 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☒ Addition Stephen Lloyd 4001 Venetian Bay Dr. Kissimmee, FL 34741		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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 exemptions contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>Steve Hamby Pres.</u> Date <u>3/29/07</u> Daytime Phone #					