

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003791

FILED
Jan 21, 2009
Secretary of State

Entity Name: SANTA MARIA AT VENETIAN GOLF & RIVER CLUB PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ADVANCED MANAGEMENT INC.
899 WOODBRIDGE DR.
VENICE, FL 34293

New Principal Place of Business:

C/O ADVANCED MANAGEMENT INC.
899 WOODBRIDGE DR.
VENICE, FL 34293

Current Mailing Address:

C/O ADVANCED MANAGEMENT INC.
899 WOODBRIDGE DR.
VENICE, FL 34293

New Mailing Address:

C/O ADVANCED MANAGEMENT INC.
899 WOODBRIDGE DR.
VENICE, FL 34293

FEI Number: 86-1062876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADVANCED MANAGEMENT INC.
899 WOODBRIDGE DR.
VENICE, FL 34293 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: PD () Delete
Name: WALNERT, BERRY DR.
Address: 149 TREVISIO COURT
City-St-Zip: NORT VENICE, FL 34275

Title: VPD () Delete
Name: OCCHINO, PHILLIP
Address: 130 TREVISIO CT.
City-St-Zip: NO VENICE, FL 34275

Title: STD () Delete
Name: RIGDON, MICHAEL
Address: 118 TREVISIO COURT
City-St-Zip: NORTH VENICE, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WALPERT, BARRY DR.
Address: 149 TREVISIO COURT
City-St-Zip: NORTH VENICE, FL 34275

Title: VPD (X) Change () Addition
Name: OCCHINO, PHILLIP
Address: 130 TREVISIO CT.
City-St-Zip: NORTH VENICE, FL 34275

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DR MICHAEL RIGDON

DTS

01/21/2009

Electronic Signature of Signing Officer or Director

Date