## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006142

FILED Apr 28, 2005 Secretary of State

Entity Name: VENETIAN BAY PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2180 WEST SR 434 SUITE 5000 10033 DR. M. L. KING JR. STREET NORTH LONGWOOD, FL 32779

SECOND FLOOR

ST. PETERSBURG, FL 33716

EICHHOLT, DUSTY

**Current Mailing Address:** New Mailing Address:

2180 WEST SR 434 SUITE 5000 10033 DR. M. L. KING JR. STREET NORTH

SECOND FLOOR LONGWOOD, FL 32779

ST. PETERSBURG, FL 33716

FEI Number: 51-0475689 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

VALENTI, BETTY D 4902 EISÉNHOWER BLVD., STE. 360

4902 EISENHOWER BLVD. MIAMI, FL 33131 SUITE 380

TAMPA, FL 33634 US

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: DUSTY EICHHOLT 04/28/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

VALENTI, BETTY D EICHHOLT, DUSTY Name: Name:

4902 EISENHOWER BLVD, STE 380 Address: 4902 EISENHOWER BLVD., SUITE 380 Address:

City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33634

Title: DV () Delete Title: (X) Change ( ) Addition

GEIGER, JONATHAN Name: GEIGER, JONATHAN Name:

Address: 2495 JOHANNA CT Address: 13555 AUTOMOBILE BLVD., SUITE 360

City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: CLEARWATER, FL 33762

Title: DST () Delete Title: (X) Change ( ) Addition SCHULMEYER, GEORGE Name: KOUWENHOVEN, BILL Name:

4902 EISENHOWER BLVD., SUITE 380 Address: 2630 S FALKENBURG RD Address:

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DUSTY EICHHOLT PD 04/28/2005