2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N03000007700

Entity Name: VENICE HIGH SCHOOL ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

209 SAN MARCO DRIVE
VENICE, FL 34285

New Principal Place of Business:

209 SAN MARCO DRIVE
VENICE, FL 34285 US

Current Mailing Address:

P O BOX 1292
VENICE, FL 34284

New Mailing Address:

FEI Number: 20-2514301 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOONE, STEPHEN K
C/O BOONE, BOONE, BOONE & FROOK, P.A.
1001 AVENIDA DEL CIRCO
VENICE, FL 34285 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: DONOVAN, JANET L
Address: 209 SAN MARCO DRIVE
City-St-Zip: VENICE, FL 34285

Title: VPD ( ) Delete
Name: ARNELL, MARILYN
Address: 744 STEWART STREET
City-St-Zip: ENGLEWOOD, FL 34223

Title: TD ( ) Delete
Name: PIERCE, CATHY
Address: 512 CATALINA ISLES CIRCLE
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LUGAR, JANET L
Address: 209 SAN MARCO DRIVE
City-St-Zip: VENICE, FL 34285 US

Title: VPD (X) Change ( ) Addition
Name: BALSINGER, ANGELA
Address: 1220 MANGO AVENUE
City-St-Zip: VENICE, FL 34285 US

Title: TD (X) Change ( ) Addition
Name: PIERCE, CATHY
Address: 512 CATALINA ISLES CIRCLE
City-St-Zip: VENICE, FL 34292 US

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: JANET L. LUGAR PD 04/29/2009

Electronic Signature of Signing Officer or Director — Date