## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jul 19, 2004 8:00 am Secretary of State 07-19-2004 90009 006 \*\*\*\*61.25

## DOCUMENT # N03000010955

1. Entity Name
THE VILLAS AT VENICE CONDOMINIUM ASSOCIATION, INC.

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137 S. PEBBLE BEACH BOULEVARD 137			ling Address 17 S. Pebble Beach Boulevard N City Center, FL 33573				54063395															
2. Principal Place of Business 3. Mai				iling Address																		
Suite, Apt. #, etc. Su				uite, Apt. #, etc.				06302004	Chg-NP	CR2E0	37 (10/03)											
City & State			Ci	City & State				4. FEI Number	3696	528	<del></del>	oplied For ot Applicable										
Zip	Country			p	intry		5. Certificate of Status Desired S8.75 Additional Fee Required															
	6. Name	ed Agent				7. Name and Address of New Registered Agent																
F&L CORP.						Name																
ONE INDEPENDENT DRIVE SUITE 1300							Street Address (P.O. Box Number is Not Acceptable)															
JACKSONVILLE, FL 32202									<del> </del>													
· 						City				FL	Zip Cod											
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. (NOTE: Registered Agent signature required when reinstating)  DATE																						
Filing Fee is \$61.25  Due by September 8, 2004  9. Election Campaign F Trust Fund Contribut								\$5.00 May Be Added to Fees  Make check payable to Florida Department of State														
10. OFFICERS AND DIRECTORS						- /	ADDITIONS/CH	ANGES TO O	FFICERS AND DI	RECTORS IN	10											
TITLE	PD			☐ Delete						Change	Addition											
NAME	PATTINSON, DEBBIE			NAM																		
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - ST- ZIP																	
TITLE	D			☐ Delete	TITLE		· · · · · ·				☐ Change	☐ Addition										
NAME	HOFFMAN, MATTHEW				E						Addition											
STREET ADDRESS	137 S. PEBBLE BEACH BOULEVARD				ET ADDRESS																	
CITY+ST-ZIP	SUN CITY CENTER, FL 33573			·		-ST-ZIP					- <u>-</u>											
TITLE	GAGLIAR	DO, PETER		→ □ Delete	, title Nami						☐ Сћалое	Addition										
STREET ADORESS	1					ET ADDRESS																
CITY-ST-ZIP	SUN CIT	CENTER, FL 33573			CITY	-ST-ZIP	_															
TITLE	VP			☐ Delete	TITLE			•		-	☐ Change	Addition										
NAME CTREET ADDRESS	BURNETT, CAROL				E																	
STREET ADDRESS CITY-ST-ZIP	137 S. PEBBLE BEACH BOULEVARD SUN CITY CENTER, FL 33573				ET ADDRESS -ST-ZIP																	
TITLE	ST			☐ Delete	TITLE			<u>-</u>			☐ Change	Addition										
NAME .	AKERS, CHERYL			,	E																	
STREET ADDRESS				-	ET ADDRESS	÷	•															
CITY-ST-ZIP	SUNCIT	CENTER, FL 33573			-	-ST-ZIP	<u></u>	<u></u>														
TITLE . NAME	- •-	• • • • • •		Delete	TITLE	-				•	Change	☐ Addition										
STREET ADDRESS		* - w				ET ADDRESS		•	-													
CITY-ST-ZIP						-ST-ZIP																
12. I hereby a	certify that th	e information supplied with	this filing	does not qualify for	the exe	mption stat	ed in Se	ction 119.07(3)(	i), Florida Stat	tutes. I further cer	12. Thereby 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 or supplemental report is true and accurate and that my signature shall have the same legal affect as if made under oath; that I am an officer or director.											

indicated on this report of suppremental 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 truster's 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 apprecia, with all other like empowered.

SIGNATURE:

941 240 1010