

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000010955

**FILED**  
**Jan 05, 2009**  
**Secretary of State**

**Entity Name:** THE VILLAS AT VENICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7000 IBIS WAY  
UNIT 101  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

7000 IBIS WAY  
UNIT 101  
VENICE, FL 34292

**New Mailing Address:**

**FEI Number:** 54-2145701      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HARPER, JOHN R  
7000 IBIS WAY UNIT 101  
VENICE, FL 34292    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: HOWARD, HAPLIN  
Address: 3000 IBIS WAY UNIT 201  
City-St-Zip: VENICE, FL 34292

Title: TD            ( ) Delete  
Name: HARPER, JOHN R  
Address: 7000 IBIS WAY UNIT 101  
City-St-Zip: VENICE, FL 34292

Title: S              ( ) Delete  
Name: PICCIN, ELAINE  
Address: 7000 IBIS WAY UNIT 201  
City-St-Zip: VENICE, FL 34292

Title: VPD           ( ) Delete  
Name: PICCIN, LLOYD  
Address: 7000 IBIS WAY STE 201  
City-St-Zip: VENICE, FL 34292

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

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

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

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

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: JOHN R. HARPER

TD

01/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date