

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42983

FILED
Mar 27, 2009
Secretary of State

Entity Name: CASA VENEZIA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

528 W. VENICE AVE #2
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

528 W. VENICE AVE.#2
APT. 4
VENICE, FL 34285 US

New Mailing Address:

FEI Number: 65-0293679 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACRIS, STEVEN W.
609 TAMIAMI TRAIL
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: TIMMONS, MARK
Address: 528 W VENICE AVE., APT. 4
City-St-Zip: VENICE, FL

Title: SD () Delete
Name: BURCHERT, RUTH
Address: 528 W. VENICE AVE., APT 2
City-St-Zip: VENICE, FL

Title: TD () Delete
Name: JUMGERMANN, HELEN A.
Address: 628 W VENICE AVE., APT. 1
City-St-Zip: VENICE, FL

Title: D () Delete
Name: KLEMET, ROY R.
Address: 528 W. VENICE AVE. #3
City-St-Zip: VENICE, FL

Title: PD () Delete
Name: TIMMONS, JACKI
Address: 528 W. VENICE AVE #4
City-St-Zip: VENICE, FL

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:

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: ROY KELMET

D

03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date