

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90081 030 ****61.25



DOCUMENT # N93000000131
1. Entity Name
VENDOME VILLAGE COUNCIL OF PRESIDENTS, INC.

Principal Place of Business C/O INFINITI PROPERTY MGMT. INC 1301 SEMINOLE BLVD, #110 LARGO FL 33770 US	Mailing Address C/O INFINITI PROPERTY MGMT. INC. 1301 SEMINOLE BLVD., #110 LARGO FL 33770 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/05)

City & State	City & State	4. FEI Number 59-3166908	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**INFINITI PROPERTY MGMT INC
1301 SEMINOLE BLVD.
STE. 110
LARGO FL 33770**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> Delete
NAME	MILLER, ROBIN	
STREET ADDRESS	8522 DEAUVILLE	
CITY-ST-ZIP	PINELLAS PARK FL 33781	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	HIGGINS, LARRY	
STREET ADDRESS	7015 MONTÉ CARLO	
CITY-ST-ZIP	PINELLAS PARK FL 33781	
TITLE	STD	<input type="checkbox"/> Delete
NAME	NICHOLAS, MARJORIE	
STREET ADDRESS	8450 VENDOME BLVD	
CITY-ST-ZIP	PINELLAS PARK FL 33781	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NORMAN, FORREST	
STREET ADDRESS	8475 - 68TH WAY N.	
CITY-ST-ZIP	PINELLAS PARK, FL 33781	
TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, DAVID	
STREET ADDRESS	6765 ARMAND PLACE	
CITY-ST-ZIP	PINELLAS PARK, FL 33781	
TITLE	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STRUBING, ROBERT	
STREET ADDRESS	6900 LAFAYETTE	
CITY-ST-ZIP	PINELLAS PARK, FL 33781	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robin Miller Robin Miller 2-61-06 727 541 3139