

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 15, 2007
Secretary of State**

DOCUMENT# N97000006770

Entity Name: VENETIAN VILLAS OF SOUTH BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

747 MICHIGAN AVE.
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 402336
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 65-0809675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BENNETT, JOAN
763 41ST STREET
SUITE C
MIAMI BEACH, FL 33140 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: P/D () Delete
Name: MATUS, ROBERT
Address: 747 MICHIGAN AVE. #202
City-St-Zip: MIAMI BEACH, FL 33139

Title: T/D () Delete
Name: IVERSON, PAULA
Address: 747 MICHIGAN AVE. #201
City-St-Zip: MIAMI BEACH, FL 33139

Title: S/D () Delete
Name: SCHNEIDER, PAUL
Address: 747 MICHIGAN AVE. #302
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S/D (X) Change () Addition
Name: IVERSON, PAULA
Address: 747 MICHIGAN AVE. #201
City-St-Zip: MIAMI BEACH, FL 33139

Title: T/D (X) Change () Addition
Name: SCHNEIDER, PAUL
Address: 747 MICHIGAN AVE. #302
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP/D () Change (X) Addition
Name: MUNOZ, CARLOS
Address: 747 MICHIGAN AVENUE #102
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Change (X) Addition
Name: BARON, SUSAN
Address: 747 MICHIGAN AVENUE #106
City-St-Zip: MIAMI BEACH, FL 33139

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: ROBERT MATOS

PD

05/15/2007

Electronic Signature of Signing Officer or Director

Date