

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

**FILED  
Jan 12, 2009  
Secretary of State**

DOCUMENT# N99000004661

Entity Name: THE GRAND VENETIAN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10 VENETIAN WAY  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

10 VENETIAN WAY  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33139 US

**New Mailing Address:**

FEI Number: 65-1148668      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SKRLD, INC.  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 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: TOKAR, JASON  
Address: 10 VENETIAN WAY, UNIT #406  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VTD ( ) Delete  
Name: HERBERT, FRANK  
Address: 10 VENETIAN WAY UNIT #2201  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: WISH, JONATHAN  
Address: 10 VENETIAN WAY UNIT #2504  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: T ( ) Delete  
Name: HARK, KEITH  
Address: 10 VENETIAN WAY #2305  
City-St-Zip: MIAMI BEACH, FL 33139

Title: S ( ) Delete  
Name: RICHARD, FINDLER  
Address: 10 VENETIAN WAY UNIT #2501  
City-St-Zip: MIAMI BEACH, FL 33139

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

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

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

Title: VTD (X) Change ( ) Addition  
Name: HENDRICKSON, JAMES  
Address: 10 VENETIAN WAY UNIT #2502  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: TOKAR JASON

PD

01/12/2009

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

\_\_\_\_\_  
Date