

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002104

FILED  
Jan 04, 2005  
Secretary of State

**Entity Name:** VENETIAN VILLAGE OF BREVARD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3415 SHADY RUN RD  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

3415 SHADY RUN RD  
MELBOURNE, FL 32934

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

COLEMAN, CHRISTOPHER J  
1329 BEDFORD DR STE 1  
MELBOURNE, FL 32940 US

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

WELSH, KEN R  
3415 SHADY RUN ROAD  
MELBOURNE, FL 32934 US

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: KEN R. WELSH

01/04/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: WELSH, KEN R  
Address: 3415 SHADY RUN RD  
City-St-Zip: MELBOURNE, FL 32934

Title: DST ( ) Delete  
Name: ROBERTSON, DAVID B  
Address: 8580 EDEN ISLES LN  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Delete  
Name: KIRSCHNER, SR., STANLEY M  
Address: 739 LOGGERHEAD DR  
City-St-Zip: SATELLITE BCH, FL 32937

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEN R. WELSH

DP

01/04/2005

Electronic Signature of Signing Officer or Director

Date