#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 741542** 

Entity Name: VENICE ACRES IMPROVEMENT ASSOCIATION, INC.

**FILED** Feb 24, 2017 **Secretary of State** CC8672714587

## **Current Principal Place of Business:**

181 CENTER ROAD VENICE, FL 34285

## **Current Mailing Address:**

181 CENTER ROAD VENICE, FL 34285 US

FEI Number: 59-2409681 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ARGUS MANAGEMENT OF VENICE, INC. 181 CENTER ROAD VENICE, FL 34285 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: BARBARA L. O'GRADY

02/24/2017

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	P	Title	VP
Name	PEARCY, JOSEPH	Name	HUTCHINSON, JEFF
Address	181 CENTER ROAD	Address	181 CENTER ROAD
City-State-Zip:	VENICE FL 34285	City-State-Zip:	VENICE FL 34285

Title Т Title S

Name JACOB, COY Name SPRINGER-TEITSMA, AGNES

Address 181 CENTER ROAD Address 181 CENTER ROAD VENICE FL 34285 City-State-Zip: City-State-Zip: VENICE FL 34285

Title Title D

Name HUGHES, JOSEPH Name SKAGGS, WILLIAM Address 181 CENTER ROAD 181 CENTER ROAD Address City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

Title MANAGEMENT Title

O'GRADY, BARBARA L Name CABLE, STEVEN Name 181 CENTER ROAD Address Address 181 CENTER ROAD City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

Continues on page 2

I hereby 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 all other like empowered.

02/24/2017 SIGNATURE: BARBARA O'GRADY PRES / MGMT CO

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title D

Name EGGLESTON, MIKE
Address 181 CENTER ROAD
City-State-Zip: VENICE FL 34285