## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 762654** 

Entity Name: VENICE BAY ADULT PARK, INC.

**Current Principal Place of Business:** 

149 SERPENTINE DR VENICE, FL 34285

**Current Mailing Address:** 

149 SERPENTINE DR VENICE, FL 34285 US

FEI Number: 59-2258014 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WISDOM COMMUNITY MANAGEMENT & BOOKKEEPING SERVICES, INC C/O JULIE TRIMPE 2831 RINGLING BLVD BLDG. B, STE 203D SARASOTA, FL 34237 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: SUSAN LANE 02/29/2024

Electronic Signature of Registered Agent Date

City-State-Zip:

Officer/Director Detail:

Title DIRECTOR Title **SECRETARY** MORGAN, ROBERT Name Name JOSEPH, MARCUS Address 147 BAYOU DR Address 149 SERPENTINE City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

TitlePRESIDENT, DIRECTORTitleDIRECTORNameDUFAULT, DAVIDNameZENNER, DON

Address 148 BAYOU DR Address 152 SERPENTINE DR

City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

TitleDIRECTOR, VPTitleTREASURER, DIRECTORNamePETERSON, MOENameLICATO, ANTHONYAddress150 SERPENTINEAddress152 SERPENTINE DRIVE

Title DIRECTOR

City-State-Zip:

Name LORENZ, GEORGE
Address 149 SERPENTINE DR
City-State-Zip: VENICE FL 34285

VENICE FL 34285

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.

SIGNATURE: DAVID DUFAULT PRE

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

VENICE FL 34285

02/29/2024 Date

FILED Feb 29, 2024

**Secretary of State** 

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