

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 192404

FILED
Mar 30, 2009
Secretary of State

Entity Name: VENETIAN ISLE APARTMENTS INC

Current Principal Place of Business:

3851 N.E. 22ND TERRACE
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

Current Mailing Address:

3851 N.E. 22ND TERRACE
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: 65-0382249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HETFIELD, JERRY R
3851 N.E. 22ND TERRACE
LIGHTHOUSE POINT, FL 33064 US

Name and Address of New Registered Agent:

HETFIELD, JERRY R
3851 N.E. 22ND TERRACE
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LIGHTHOUSE POINT, FL 33064 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:

03/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WHALEN, ROBERT
Address: 3851 N.E. 22ND TERRACE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: S () Delete
Name: HURT, RITA
Address: 3851 N.E. 22ND TERRACE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: P () Delete
Name: HETFIELD, JERRY
Address: 3851 NE 22 TERR
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: V () Delete
Name: BRADLEY, KRISTEN
Address: 3851 NE 22 TERR
City-St-Zip: LIGHTHOUSE PT., FL 33064

Title: D () Delete
Name: CHRISTIANO, MARIE
Address: 3851 NE 22 TERR
City-St-Zip: LIGHTHOUSE PT., FL 33064

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT WHALEN

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03/30/2009

Electronic Signature of Signing Officer or Director

Date