

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90032 036 ***150.00

DOCUMENT # 556235 1. Entity Name VENETIAN TERRACE MANAGEMENT CO.					
Principal Place of Business 901 NORTHPOINT PKWY STE 301 WEST PALM BCH, FL 33407-1953 US			Mailing Address 901 NORTHPOINT PKWY STE 301 WEST PALM BCH, FL 33407-1953 US		
2. Principal Place of Business 1441 Princeton Lane		3. Mailing Address 1441 Princeton Lane			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Boynton Beach, FL		City & State Boynton Beach, FL			
Zip 33426		Country Palm Beach		Zip 33426	
Country Palm Beach		Country Palm Beach			
4. FEI Number 59-1935225					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent ROSSI, ENRICO 901 NORTHPOINT PKWY STE 301 WEST PALM BCH, FL 33407					
7. Name and Address of New Registered Agent Name Hammett, Craig Street Address (P.O. Box Number is Not Acceptable) 1441 Princeton Lane City Boynton Beach FL Zip Code 33426					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Craig H. H.</i></u> DATE <u>2/9/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSSI, ENRICO ☒ Delete 901 NORTHPOINT PKWY, STE 301 WEST PALM BCH, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Hammett, Craig ☒ Change ☐ Addition 1441 Princeton Lane Boynton Beach, FL 33426				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D laradestra, Andrew ☒ Change ☐ Addition 1441 Princeton Lane Boynton Beach, FL 33426				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Craig H. H.</i></u> DATE <u>2/9/06</u> DAYTIME PHONE # <u>561-733-1275</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					