

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90070 039 ****61.25

DOCUMENT # 702986

1. Entity Name

VENICE BEACH APARTMENTS ONE INC



Principal Place of Business

100 THE ESPLANADE NORTH
VENICE FL 34285

Mailing Address

100 THE ESPLANADE NORTH
21
VENICE FL 34285

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0968751

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, ROBERT L
227 S NOKOMIS AVE
VENICE FL 34285

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SILVA, LORRAINE ☒ Delete
STREET ADDRESS 100 ESPLANADE #20
CITY-ST-ZIP VENICE FL 34285

TITLE VPD
NAME MAHONEY, HENRY J ☐ Delete
STREET ADDRESS 100 THE ESPLANADE #2
CITY-ST-ZIP VENICE FL 34285

TITLE SD
NAME COLLINS, JUDY ☒ Delete
STREET ADDRESS 100 ESPLANADE #4
CITY-ST-ZIP VENICE FL 34285

TITLE TD
NAME EMERSON, WILLIAM M ☐ Delete
STREET ADDRESS 100 THE ESPLANADE #16
CITY-ST-ZIP VENICE FL 34285

TITLE ~~VPD~~ VPD
NAME STINSON, SHIRLEY ☐ Delete
STREET ADDRESS 100 THE ESPLANADE #15
CITY-ST-ZIP VENICE FL 34285

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME PATSY BENSON
STREET ADDRESS 100 The Esplanade #6
CITY-ST-ZIP Venice FL 34285

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☐ Addition
NAME PAT JACKSON
STREET ADDRESS 100 THE Esplanade #18
CITY-ST-ZIP Venice FL 34285

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: W. M. Emerson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/04

Date

941-485-0296

Daytime Phone #