

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705336

FILED
Jan 04, 2008
Secretary of State

Entity Name: THE VENICE ENDOWMENT, INC.

Current Principal Place of Business:

601 TAMIAMI TRAIL SOUTH
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

601 TAMIAMI TRAIL SOUTH
VENICE, FL 34285

New Mailing Address:

FEI Number: 59-0668991

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSEN, TERI A
601 TAMIAMI TRAIL SOUTH
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CONROY, RICHARD
Address: 601 TAMIAMI TRAIL SOUTH
City-St-Zip: VENICE, FL 34285

Title: S () Delete
Name: DEMING, WENDY M
Address: 601 TAMIAMI TRAIL SOUTH
City-St-Zip: VENICE, FL 34285

Title: VCD () Delete
Name: SCHROEDER, GRATIA
Address: 601 TAMIAMI TRAIL SOUTH
City-St-Zip: VENICE, FL 34285

Title: PD () Delete
Name: HANSEN, TERI A
Address: 601 SOUTH TAMIAMI TRAIL
City-St-Zip: VENICE, FL 34285

Title: T () Delete
Name: YOUNG, SYDNEY
Address: 601 TAMIAMI TRAIL SOUTH
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: ROLPH, MIKE
Address: 1729 CARIBBEAN DRIVE
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VCD (X) Change () Addition
Name: KOKOMOOR, KARL
Address: 601 TAMIAMI TRAIL SOUTH
City-St-Zip: VENICE, FL 34285

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

SIGNATURE: WENDY DEMING

S

01/04/2008

Electronic Signature of Signing Officer or Director

Date