SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

FILED
Sep 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 706209 (4)

1. Corporation Name
VENICE GARDENS HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
406 SHAMROCK BLVD. VENICE FL 34293 US	P.O. BOX 781 VENICE FL 34285 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/23/1963
3a. Date of Last Report: 08/14/1996

2. Principal Place of Business (21): 406 Shamrock Blvd
2a. Mailing Address (26): PO Box 6082

Suite, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):

City & State (23):
City & State (28): Venice FL

Zip (24): Country (25):
Zip (29): 34282-0682 Country (30):

4. FEI Number: 59-1087285 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FERGUSON, ROBERT
235 BAL HARBOUR DR.
VENICE FL 33595

Paid 1-21-97 ck 7207

10. Name and Address of New Registered Agent

81 Name: Smith, Dale
82 Street Address (P.O. Box Number is Not Acceptable): ~~424 Peppertree Road~~
83: 649 MICHIGAN DR. N.
84 City: Venice, FL **FL** 85 Zip Code: 34293

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: X Dale Wm Smith SEPT 1 1997
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	TREASURE	☐ Change ☒ Addition
NAME	RAND, ALICE		1.2 NAME	H. Walter Westman	
STREET ADDRESS	428 EDGEWOOD RD		1.3 STREET ADDRESS	2386 Bal Harbour Dr	
CITY-ST-ZIP	VENICE FL 34293		1.4 CITY-ST-ZIP	Venice, FL 34293	
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	O'GORMAN, KIMBERLY		2.2 NAME		
STREET ADDRESS	564 NEPONSIT DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34293-1118		2.4 CITY-ST-ZIP		
TITLE	President	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, DALE		3.2 NAME		
STREET ADDRESS	424 PEPPERTREE ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34293		3.4 CITY-ST-ZIP		
TITLE	D VP	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BOWMAN, JAMES		4.2 NAME		
STREET ADDRESS	626 MICHIGAN DR. S.		4.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34293		4.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	PEREIRA, JEAN ~~MAYNE~~		5.2 NAME	PEREIRA, JEAN H.	
STREET ADDRESS	1763 DAGON RD		5.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34293		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SCHATTNER, WALTER		6.2 NAME		
STREET ADDRESS	455 CLOVER RD.		6.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34293		6.4 CITY-ST-ZIP		

CR2E037 (4/97)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X SIGNATURE REQUIRED SEPT 1, 941-493-6541