

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707297

FILED
Jan 11, 2010
Secretary of State

Entity Name: VENICE EAST COMMUNITY ASSOCIATION INC

Current Principal Place of Business:

564 WHIPPOORWILL DR.
VENICE, FL 34293

New Principal Place of Business:

107 VENICE EAST BLVD.
VENICE, FL 34293

Current Mailing Address:

564 WHIPPOORWILL DR.
VENICE, FL 34293

New Mailing Address:

377 SUNNYSIDE DR.
VENICE, FL 34293

FEI Number: 59-2820364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTORELLA, BARBARA
377 SUNNYSIDE DR.
VENICE, FL 34293 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: D
Name: JOSEPH, JACK
Address: 446 MEXICALI AVE
City-St-Zip: VENICE, FL

Title: T
Name: SANTORELLA, BARBARA J
Address: 377 SUNNYSIDE DR.
City-St-Zip: VENICE, FL 34293

Title: P
Name: JUNE, ELMER
Address: 282 DORCHESTER DR
City-St-Zip: VENICE, FL 34293

Title: VP
Name: AUGSBURGER, HAROLD
Address: 378 PINEVIEW DR
City-St-Zip: VENICE, FL 34293

Title: S
Name: AHRENS, MARILYN
Address: 564 WHIPPOORWILL DR.
City-St-Zip: VENICE, FL 34293

Title: D
Name: HLADKY, BARBARA
Address: 214 ARNO RD
City-St-Zip: VENICE, FL 34293

I hereby 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 all other like empowered.

SIGNATURE: MARILYN AHRENS

S

01/11/2010

Electronic Signature of Signing Officer or Director

Date