

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90082 036 *****61.25

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DOCUMENT # 707345

1. Entity Name

THE VENICE FOUNDATION, INC.

Principal Place of Business

601 SOUTH TAMiami TRAIL
~~SUITE B~~
VENICE FL 34285
US

Mailing Address

601 SOUTH TAMiami TRAIL
SUITE B
VENICE FL 34285
US

2. Principal Place of Business

601 South Tamiami Trail

Suite, Apt. #, etc.

3. Mailing Address

601 South Tamiami Trail

Suite, Apt. #, etc.

City & State

Venice FL

City & State

Venice FL

Zip

34285

Country

USA

Zip

34285

Country

USA

4. FEI Number

59-1052433

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PREIKSAT, JON
THE VENICE FOUNDATION INC
601 SOUTH TAMiami TRAIL, ~~SUITE B~~
VENICE FL 34285

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD CORD, MELLOR 13801 D TAMiami TRAIL VENICE FL 34285	Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PREIKSAT, JON 601 SOUTH TAMiami TRAIL, SUITE B VENICE FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COLLINS, JUDY 461 BAYSHORE DR VENICE FL 34285	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SLATTERY, THOMAS 460 ANCHORAGE DR NOKOMIS FL 34275	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KILLORIN, JAMIE 1521 S TAMiami TRAIL SUITE 303 VENICE FL 34292	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SCHULTEN, MAURICE M D 436 S. NOKOMIS AVENUE VENICE FL	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mellor, Cord 13801 S. Tamiami Tr. Suite D North Port, FL 34287	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Collins, Judy 461 Bayshore Dr. Venice, FL 34285	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Pete Mason, Jr. 699 S. Indiana Ave Englewood, FL 34223	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Killorin, Jamie 1521 S. Tamiami Trail Suite 303 Venice FL 34292	☒ 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 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

[Signature] **3/29/01 941-486-4600**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)