

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710002

FILED  
Jan 25, 2006  
Secretary of State

Entity Name: KREWE OF VENUS, INC., TAMPA.

**Current Principal Place of Business:**

9000-C N. FLORIDA AVE.  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

9000-C N. FLORIDA AVE.  
TAMPA, FL 33604

**New Mailing Address:**

FEI Number: 59-1151223

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CALDERAZZO, WILLIAM  
104 E FOWLER AVE  
SUITE 201  
TAMPA, FL 33612 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 ( ) Delete  
Name: PHILLIPS, SHARON  
Address: 3310 DEL PRADO COURT  
City-St-Zip: TAMPA, FL 33614

Title: PR ( ) Delete  
Name: RASMUSSEN, RICHARD  
Address: 13705 CHESTERALL DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: DT ( ) Delete  
Name: VALDEZ, ROBERT  
Address: 1906 W. PLATT ST.  
City-St-Zip: TAMPA, FL 33606

Title: VP ( ) Delete  
Name: CALDERAZZO, WILLIAM  
Address: 104 E. FOWLER AVE. # 201  
City-St-Zip: TAMPA, FL 33612

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CALDERAZZO, WILLIAM  
Address: 104 E FOWLER AVE # 201  
City-St-Zip: TAMPA, FL 33612 52

Title: D (X) Change ( ) Addition  
Name: RASMUSSEN, RICHARD  
Address: 13705 CHESTERALL DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: D (X) Change ( ) Addition  
Name: VALDEZ, ROBERT  
Address: 1906 W. PLATT ST.  
City-St-Zip: TAMPA, FL 33606

Title: VP (X) Change ( ) Addition  
Name: CARVER, TIMOTHY  
Address: 18207 WIMBLEDON GREEN PLACE  
City-St-Zip: TAMPA, FL 33647

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM CALDERAZZO

P

01/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date