## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#713887** 

FILED Apr 14, 2009 Secretary of State

Entity Name: IMPERIAL HOUSE OF VENICE, INC.

**Current Principal Place of Business: New Principal Place of Business:** ARGUS MANAGEMENT OF VENICE, INC. 181 CENTER ROAD VENICE, FL 34285 **Current Mailing Address: New Mailing Address:** ARGUS MANAGEMENT OF VENICE, INC. 181 CENTER ROAD VENICE, FL 34285 FEI Number: 59-1310648 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARGUS MANAGEMENT OF VENICE, INC. 181 CENTER ROAD VENICE, FL 34285 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition DOUGLAS, LEORA Name: Name: 333 THE ESPLANDADE N 208 Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: SD () Delete Title: () Change () Addition MCCARTHY, CELESTE Name: Name: Address: 333 THE ESPLANADE N., #105 Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: () Change () Addition DANIELS, BONNIE Name: Name: 333 THE ESPLANADE N., #203 Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: (X) Change ( ) Addition Title: AS () Delete Title: **TRES** Name: MARKEL, JIM Name: JOYCE, GAYLE Address: 1801 GLENGARY ST Address: 333 THE ESPLANADE N City-St-Zip: SARASOTA, FL 34231 City-St-Zip: VENICE, FL 34285 Title: ( ) Delete Title: (X) Change ( ) Addition SOBAK, RICHARD HUMPHRIES, JIM Name: Name: 333 THE ESPLANADE N., #209 333 THE ESPLANADE N Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: VENICE, FL 34285

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: BONNIE DANIELS **PRES** 04/14/2009