

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90193 026 ****61.25

DOCUMENT # 714879

1. Entity Name

VENETIAN ISLE, INC.



Principal Place of Business

4000 GULF SHORE BLVD. N.
NAPLES FL 33940-3428

Mailing Address

C/O MELDON CONSULTANTS
4949 TAMiami TrL N. STE 201
NAPLES FL 34103-3017



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-1738781

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOORE, WILLIAM S.
C/O MELDON CONSULTANTS
4949 TAMiami TrL N. STE 201
NAPLES FL 34103-3017

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DVP
NAME KLOBE, ARTHUR H
STREET ADDRESS 4000 GULF SHORE BLVD. N. #3300
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE DVP
NAME MERZ, DONALD
STREET ADDRESS 4000 GULF SHORE BLVD N #2800
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE DP
NAME KREAGER, DIANE
STREET ADDRESS 4000 GULF SHORE BLVD N #2500
CITY-ST-ZIP NAPLES FL ☒ Delete

TITLE DS
NAME COUTURE, JOHANNA
STREET ADDRESS 4000 GULF SHORE BLVD N. #1700
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE DT
NAME RUST, FREDRIC
STREET ADDRESS 4000 GULF SHORE BLVD N. #2700
CITY-ST-ZIP NAPLES FL 34103 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME FINNEGAN, BLAIR
STREET ADDRESS 4000 GULF SHORE BLVD. NORTH #1800
CITY-ST-ZIP NAPLES, FL 34103 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DP
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ 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 exemptions contained in Section 119, 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

Johanne Couture Johanne Couture 4/24/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone #