

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717183

FILED
Apr 27, 2008
Secretary of State

Entity Name: VENICE YOUTH BOATING ASSOCIATION, INC.

Current Principal Place of Business:

1330 TARPON CENTER RD
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

1330 TARPON CENTER RD
VENICE, FL 34285 US

New Mailing Address:

FEI Number: 23-7112816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C KELLEY CORBRIDGE
240 NOKOMIS AVE S
SUITE 240
VENICE, FL 34285 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: PD () Delete
Name: THOMAS, JOHN
Address: 5931 PLOVER RD
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: SIMS, CHARLOTTE
Address: 259 BAILEY RD
City-St-Zip: VENICE, FL 34292

Title: VD () Delete
Name: FROST, SCOTT
Address: 220 SORRENTO RANCHES DR
City-St-Zip: NOKOMIS, FL 34275

Title: VD () Delete
Name: WHITE, KEVIN
Address: 1065 TRUMAN ST
City-St-Zip: NOKOMIS, FL 34275

Title: SD () Delete
Name: ANDERSON, BETH
Address: 742 EAGLE POINT DR
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: DOMBROWSKI, JOSEPH
Address: 453 ANCHORGE DR
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PATETE, CELESTE
Address: 507 VELASQUEZ DRIVE
City-St-Zip: OSPREY, FL 34229

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: CELESTE PATETE

T

04/27/2008

Electronic Signature of Signing Officer or Director

Date