

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725644

FILED
Feb 10, 2011
Secretary of State

Entity Name: VENETIAN MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

335 NORTH CAUSEWAY
NEW SMYRNA BEACH, FL 321695242

New Principal Place of Business:

Current Mailing Address:

335 NORTH CAUSEWAY
NEW SMYRNA BEACH, FL 321695242

New Mailing Address:

FEI Number: 59-1479913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANGINE, LOIS
335 N CAUSEWAY C24
NEW SMYRNA BEACH, FL 32169 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: P
Name: MANGINE, LOIS
Address: 335 N CAUSEWAY #C-24
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VP
Name: SEIBEL, ED
Address: 335 N CAUSEWAY B-24
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T
Name: FUQUA, REBA
Address: 335 N CAUSEWAY H-5
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: S
Name: VEIRS, WENDA
Address: 355 N CAUSEWAY E-4
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: AS
Name: TODD, ROSE
Address: 172 BREEZEWAY COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: AT
Name: TODD, ROSE
Address: 172 BREEZEWAY COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby 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 all other like empowered.

SIGNATURE: LOIS MANGINE

P

02/10/2011

Electronic Signature of Signing Officer or Director

Date