

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730080

1. Entity Name

VILLAS OF VENICE, INC. CONDOMINIUM ASSOCIATION

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90161 008 ****61.25

Principal Place of Business

Mailing Address

908 VILLAS DRIVE
VENICE FL 34285
US

C/O KEYS-CALDWELL, INC.
~~250 TAMPA AVE~~
VENICE FL 34285
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1552715

Applied For

Not Applicable

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

CALDWELL, KEYS I
~~250 W TAMPA AVENUE~~
VENICE FL 34285

Name

Keys - Caldwell, Inc.

Street Address (P.O. Box Number is Not Acceptable)

1747 S. Tamiami Tr #223

City

Venice

FL

Zip Code

34293

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAGLIARONU, TRUDY 6600 BLVD E #20F WEST NEW YORK NJ	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRIST, RICHARD 145 ACADEMY SALAMANCA NY 14779	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NO D (change) MULLER, MIKE 50082 WILLIAMS RD HARTFORD WI 53027	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD (change) ESPOSTI, MARCELLO 908 VILLAS DRIVE 6 VENICE FL 34285	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLIFFORD, JAMES 121 EDGEWOOE DR FLORHAM PARK NJ 07932	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DI FRANCISCO, ANTHONY 22 WOODLAND PARK DR HAVERHILL MA 01830	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLINT, WARREN 851 TARTAN DR VENICE FL 34293	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NO VD SMITH GRISWOLD, MARY ANN 908 VILLAS DR #74 Venice FL 34285	☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Welsh, Rob 908 Villas Dr #73 Venice FL 34285	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROWDEN, MARGY 908 VILLAS DR #9 Venice FL 34285	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORENDORFF, LOUIS 908 VILLAS DR #61 Venice FL 34285	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRODZICKI, KEVIN 908 VILLAS DR #23 VENICE FL 34285	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)