

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730080

FILED
Apr 21, 2011
Secretary of State

Entity Name: VILLAS OF VENICE, INC. CONDOMINIUM ASSOCIATION

Current Principal Place of Business:

899 WOODBRIDGE DR
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

899 WOODBRIDGE DR
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 59-1552715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADVANCED MANAGEMENT OF SW FLA
899 WOODBRIDGE DR
VENICE, FL 34293 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: SD
Name: MEDRICH, MELVIN
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

Title: D
Name: URBAN, BELA
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

Title: D
Name: DICICCO, SABATO
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

Title: D
Name: BYRNE, JOHN
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

Title: PD
Name: MUELLER, MICHAEL
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

Title: VPTD
Name: SZYMANSKI, BERNARD
Address: 899 WOODBRIDGE DRIVE
City-St-Zip: VENICE, FL 34293

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: MICHAEL MUELLER

PD

04/21/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date