

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 731538

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** LAS PALMAS CONDOMINIUM ASSOCIATION OF VENICE, INC.

**Current Principal Place of Business:**

519 ALBEE FARM RD.  
VENICE, FL 34292

**New Principal Place of Business:**

**Current Mailing Address:**

519 ALBEE FARM RD  
VENICE, FL 34285

**New Mailing Address:**

**FEI Number:** 59-1978250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAASCH, SANDI EA  
333 TAMiami TRAIL S STE 257  
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: VP  
Name: VENUTI, JOSEPH E JR  
Address: 809 PERKINS LANE  
City-St-Zip: NOKOMIS, FL 34275

Title: P  
Name: ROWE, GARY  
Address: 519 ALBEE FARM RD.  
City-St-Zip: VENICE, FL 34292

Title: S  
Name: AMEE, STEPHEN  
Address: 519 ALBEE FARM RD  
City-St-Zip: VENICE, FL 34285

Title: T  
Name: STAFFORD, ANNE  
Address: 40 HIGHVIEW PLACE EAST  
City-St-Zip: GREENBUSH, NY 12061

Title: D  
Name: DAVIS, JEANNETTE  
Address: 2145 GREY OAK COVE  
City-St-Zip: PORTAGE, MI 49024

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: GARY ROWE

PRES

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date