## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 734842**

FILED Feb 10, 2006 Secretary of State

Entity Name: VENETIAN PARK CONDOMINIUM I ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2308 NE 7 ST 915 NE 24 AVE

HALLANDALE, FL 33009 HALLANDALE, FL 33009 US LIS

**Current Mailing Address:** New Mailing Address:

2308 NE 7 ST 915 NE 24 AVE

HALLANDALE, FL 33009 US HALLANDALE, FL 33009 US

FEI Number: 59-1769384 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GOLDMAN, VICKI SCHNEIDER, IRWIN 2308 NE 7 ST 915 NE 24 AVE

HALLANDALE, FL 33009 HALLANDALE, FL 33009 US US

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: IRWIN H SCHNEIDER 02/10/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

GOLDMAN, VICKI SCHNEIDER, IRWIN Name: Name: 2308 NE 7 ST Address: 915 NE 24 AVE Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: HALLANDALE, FL 33009

Title: Title: (X) Change ( ) Addition ( ) Delete

CENTARO, RONALD Name: TICE, MICHAEL Name: Address: 612 NE 25 AVE Address: 2304 NE 7 STREET City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: HALLANDALE, FL 33009

Title: STD () Delete Title: (X) Change ( ) Addition SIEGEL, LORA Name: HAUGHTON-JAMES, MONICA Name:

2301 NE 7TH STREET Address: Address: 806 NE 25 AVE City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: HALLANDALE, FL 33009

Title: () Delete Title: TD ( ) Change (X) Addition

Name: Name: ARNET, ROSWITA Address: Address: 919 NE 24 AVE City-St-Zip: City-St-Zip: HALLANDALE, FL 33009

Title: () Delete Title: ( ) Change (X) Addition

KAUFMAN, BERT Name: Name: 2410 NF 9 ST Address: Address: HALLANDALE, FL 33009 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: IRWIN H SCHNEIDER PD 02/10/2006