

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 04, 2004 8:00 am**  
**Secretary of State**

03-04-2004 90013 018 \*\*\*\*61.25

**DOCUMENT # 734843**

1. Entity Name

VENETIAN PARK RECREATION ASSOCIATION, INC.



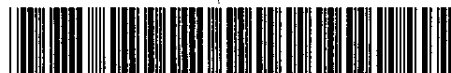
Principal Place of Business

Mailing Address

801 NE 25TH AVE  
HALLANDALE FL 33009

801 NE 25TH AVE  
HALLANDALE FL 33009

94024134



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1769383

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GOLDMAN, VICKI L  
2308 NE 7 ST.  
HALLANDALE FL 33209

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

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**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P  
NAME GOLDMAN, VICKI L ☐ Delete  
STREET ADDRESS 2308 NE 7 ST.  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME KOLBER, ESTHER ☐ Delete  
STREET ADDRESS 2211 NE 7TH STREET  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD  
NAME CHIZEN, DAVID ☐ Delete  
STREET ADDRESS 2411 N.E. 9TH ST.  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE VPD ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME CARL, CHRISTIANSEN ☐ Delete  
STREET ADDRESS 2216 N.E. 11TH ST.  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE STD ☒ Change ☐ Addition  
NAME DANIEL MIULESCH  
STREET ADDRESS 2208 N.E. 11th St.  
CITY-ST-ZIP HALLANDALE, FL. 33009

TITLE VPD  
NAME VELSKY, LEON VOLO ☐ Delete  
STREET ADDRESS 2421 N.E. 11 THE ST.  
CITY-ST-ZIP HALLANDALE FL 33009

TITLE D ☒ Change ☐ Addition  
NAME WILLIAM BARLOWE  
STREET ADDRESS 947 N.E. 24th AVE.  
CITY-ST-ZIP HALLANDALE, FL. 33009

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Vicki L. Goldman*, VICKI L. GOLDMAN 2/27/04 (954) 456-6950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #