

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734843

FILED
Apr 30, 2009
Secretary of State

Entity Name: VENETIAN PARK RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

801 NE 25TH AVE
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

801 NE 25TH AVE
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 59-1769383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARSON, HOWARD
2208 NE 11 STREET
HALLANDALE, FL 33009 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: D () Delete
Name: SCHNEIDER, IRWIN H
Address: 915 NE 24 AVENUE
City-St-Zip: HALLANDALE, FL 33009

Title: TD () Delete
Name: BEHAR, ERIC
Address: 2211 NE 7TH STREET
City-St-Zip: HALLANDALE, FL 33009

Title: VPD () Delete
Name: CHIZEN, DAVID
Address: 2411 N.E. 9TH ST.
City-St-Zip: HALLANDALE, FL 33009

Title: PD () Delete
Name: GARSON, HOWARD
Address: 2208 N.E. 11TH ST.
City-St-Zip: HALLANDALE, FL 33009

Title: SD () Delete
Name: BARRON, GERTRUDE
Address: 2415 NE 10 ST
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARSON, HOWARD
Address: 2208 NE 11 STREET
City-St-Zip: HALLANDALE, FL 33009

Title: D (X) Change () Addition
Name: WAINSTEIN, MARK
Address: 2202 NE 7TH STREET
City-St-Zip: HALLANDALE, FL 33009

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SCHNEIDER, IRWIN H
Address: 915 NE 24 AVENUE
City-St-Zip: HALLANDALE, FL 33009

Title: TSD (X) Change () Addition
Name: BARRON, GERTRUDE
Address: 2415 NE 10 ST
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify 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: HOWARD GARSON

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date