## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 735423**

1. Corporation Name

VENTURE THREE, INC.

Principal I	Place	of	Business
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Mailing Address

10701 SOUTH OCEAN DR.

10701 SOUTH OCEAN DR.

## **FILED** Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90012 035 \*\*\*\*61.25

JENSEN BEAL	NOEN BEACH FL 3450/ JENSEN DEACH FL 3450/							
		٠						
2. Principal P	Place of Business	2a. Mailing Address			3. Date Incorporated or Quali	fed		•
21		26		03/30/1976				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		App	lied For
22		27		•	59-1726007	•	Not	Applicable
City & Stat	te	City & State			E Carlifactor of Chapter Decision		\$8.75 A	dditional
23		28		5. Certificate of Status Desired Fee Required			quired	
Zip	Country	Zip Country		6. Election Campaign Financing \$5.00 May Be			Vlav Be	
24	25	29	30		Trust Fund Contribution	1 1 1		
	9. Name and Address of Current				10. Name and Address of Ne	w Registered	Agent	
			81	Name				
MOCAUT	IN TEREMOT D. ATTY		82	Cton at Addr	(D.O. Bay Number is Not Aco	ontable)	<del></del> :	<u> </u>
	HY, TERENCE P., ATTY.		54	Street Add	ress (P.O. Box Number is Not Acceptable)			
	OCEAN BLVD.		83	3				,
STUART,	34996							
ļ .		•	84	City .	•	FL	85 Zip C	ode
	to the provisions of Sections 617.0502	1017 1500 51 11 01 11		1	and a sub-state this state ment for			registered
agent. I a	registered agent, or both, in the State o am familiar with, and accept the obligation	ons of, Section 617.0503, Flo	rida Statute	s.		DATE	2	
	Stgnature, typed or printed name of registered agent			ent signature require	ed when reinstating) ADDITIONS/CHANGES TO		ND DIRECTOR	2S IN 12
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS AI	Change	Addition
TITLE	\$	☐ DETE IE	1.1 TITLE					
NAME	DANIELSON, JEAN E		1.2 NAME		•			
STREET ADDRESS	1	·	1.3 STREE	ET ADDRESS	,			
CITY-ST-ZIP	JENSEN BEACH FL 34957		1.4 CITY-	ST-ZIP			<del></del>	——————————————————————————————————————
TITLE	P	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME	SCOTT, WALTER J		2.2 NAME					
STREET ADDRESS	10701 S. OCEAN DR. #681		2.3 STREE	ET ADDRESS				
CITY-ST-ZIP	JENSEN BEACH FL	•	2.4 CITY-	ST-ZiP	• •			
TITLE	VD	☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME	PLEYTE, GARY		3.2 NAME					
STREET ADDRESS	N. T. T. T. L.	8	3.3 STREE	TADDRESS	•			
CITY-ST-ZIP:	JENSEN BEACH FL 34957		3.4. CITY-					
TITLE	VD	☐ DELETE	4.1 TITLE	V, MI			Change	Addition
1	1		4. 2 NAME		•			
NAME	MCDERMOTT, ROBERT				2		2,3	
STREET ADDRESS	10751 S OCEAN DR, A-8			ET ADDRESS				
L OWN LOT THE	T ILKUEN DEACH EL 9/067		4.4.CITV	CT 710 I				

STREET ADDRESS CITY-ST-ZIP 14. 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 annual report of supplemental annual 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 coporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

TD

NAME OF FREE PARTY

MOHR, DAVID

10701 S OCEAN DRIVE, #800

JENSEN BEACH FL 34957

TITLE

NAME

STREET ADDRESS

TIFLE

CITY-ST-ZIP

DELETE

DELETE.

☐ Change

Change

☐ Addition

☐ Addition