

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735423

FILED
Feb 26, 2008
Secretary of State

Entity Name: VENTURE THREE, INC.

Current Principal Place of Business:

10701 SOUTH OCEAN DR.
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

10701 SOUTH OCEAN DR.
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 59-1726007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STONE, DAN ADMIN.
3182 N.E. IVY LANE
JENSEN BEACH, FL 34957 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: PD () Delete
Name: LEMBACH, WILLIAM PRES.
Address: 10901 S OCEAN DR #647
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: VD () Delete
Name: DWYER, WILLIAM VPRES.
Address: 10751 S OCEAN DR #B-11
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: VD () Delete
Name: GARDNER, RICHARD VPRES.
Address: 10701 S OCEAN DR # 670
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: TD () Delete
Name: WINIARSKI, JOSEPH TREAS
Address: 10701 S OCEAN DR #874
City-St-Zip: JENSEN BEACH, FL 34957 US

Title: SD () Delete
Name: COUSINO, SALLY SECY.
Address: 10701 S. OCEAN DR #714
City-St-Zip: JENSEN BEACH, FL 34957 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TD (X) Change () Addition
Name: NICOLAISEN, PAUL TREAS
Address: 10701 S OCEAN DR #871
City-St-Zip: JENSEN BEACH, FL 34957 US

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

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: WILLIAM LEMBACH

PRES

02/26/2008

Electronic Signature of Signing Officer or Director

_____ Date