2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# 737452

Entity Name: VENETIAN PARK CONDOMINIUM III ASSOCIATION, INC.

Current Principal Place of Business:

801 NE 25TH AVENUE
HALLANDALE BEACH,, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 284
HALLANDALE BEACH,, FL 33008 US

New Mailing Address:

FEI Number: 59-1769413 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BARON, GERTRUDE PRES
2415 NE 10TH ST
HALLANDALE BEACH,, 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: SD ( ) Delete
Name: TROIANO, RICHARD SD
Address: 937 NE 24TH AVE
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: TD ( ) Delete
Name: LYONS, GERALDINE TD
Address: 2414 NE 10TH STREET
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: PD ( ) Delete
Name: BARON, GERTRUDE
Address: 2415 NE 10TH STREET
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D ( ) Delete
Name: BERKOWITZ, SETH
Address: 943 NE 24TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: D ( ) Delete
Name: OSBURN, RACHEL
Address: 939 NE 24TH AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009 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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: GERALDINE LYONS SD 04/16/2009
Electronic Signature of Signing Officer or Director — Date