


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90051 040 \*\*\*\*61.25

<b>DOCUMENT # 740663</b> 1. Entity Name <b>VENDOME VILLAGE UNIT FIVE ASSOCIATION, INC.</b>					
Principal Place of Business <b>C/O INFINITI PROP MGMT INC 1301 SEMINOLE BLVD #110 LARGO FL 33770 US</b>			Mailing Address <b>C/O INFINITI PROP MGMT INC 1301 SEMINOLE BLVD #110 LARGO FL 33770 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-1654757</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>INFINITI PROPERTY MANAGEMENT, INC 1301 SEMINOLE BLVD, SUITE 110 LARGO FL 33770</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b>	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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>NICHOLAS, MARGORIE L</b>		NAME	<b>MARJORIE</b>	
STREET ADDRESS	<b>8450 VENDOME BLVD</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>PINELLAS PARK FL</b>		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>WRIGHT, CAROL</b>		NAME	<b>V/D GOOD, CAROL</b>	
STREET ADDRESS	<b>6760 RIVIERA</b>		STREET ADDRESS	<b>8750 RIVIERA</b>	
CITY-ST-ZIP	<b>PINELLAS PARK FL 33781</b>		CITY-ST-ZIP	<b>PINELLAS PARK, FL 33781</b>	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>DOUGHTY, MARGARET</b>		NAME	<b>D ZALOM, LOIS</b>	
STREET ADDRESS	<b>8470 CALAIS</b>		STREET ADDRESS	<b>6760 RIVIERA</b>	
CITY-ST-ZIP	<b>PINELLAS PARK FL 33781</b>		CITY-ST-ZIP	<b>PINELLAS PARK, FL 33781</b>	
TITLE	STD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>FREE, SUE</b>		NAME		
STREET ADDRESS	<b>8445 CALAIS</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>PINELLAS PARK FL 33781</b>		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>DOMINQUEZ, AGNES</b>		NAME		
STREET ADDRESS	<b>8475 CALAIS</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>PINELLAS PARK FL 33781</b>		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:** *Marjorie Nicholas* *2-1-06* (727) 541-3904