2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 14, 2008 08:00 AN **DOCUMENT # 740847** 1. Entity Name **Secretary of State** VENDOME VILLAGE UNIT TWO ASSOCIATION, INC. Principal Place of Business Mailing Address % INFINITI PROPERTY MANAGEMENT, INC 1301 SEMINOLE BLVD., STE. 110 LARGO FL 33770 C/O INFINITI PROPERTY MANAGEMENT INC 1301 SEMINOLE BLVD., STE. 110 LARGO FL 33770 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-1654753 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INFINITI PROPERTY MANAGEMENT INC Street Address (P.O. Box Number is Not Acceptable) 1301 SEMINOLE BLVD., STE. 110 **LARGO FL 33770** City 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 Signature, typed or arrated name of registered agent and the if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1; 2008 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VD TITLE ☐ Delete TATLE ☐ Change DINOLFO, MARY NAME NAME 8355 VENDOME BLVD. STREET ADDRESS STREET ADDRESS U00000858239 CITY-ST-ZIP PINELLAS PARK FL 33781 CITY - ST-ZIP 04/01/08-80037-014 61.25 TITLE Delete TITLE ☐ Change ___ Addition ZEHNER, ROBERT NAME STREET ADDRESS 8330 VENDOME BLVD STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZiP \$T& TOLE Delete TITLE [| Change I I Addition ROSENTHAL, EDIE NAME NAME STREET ADDRESS 8430 VENDOME BLVD STREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE C Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP TITLE ☐ Delete TITLE ☐ Change ☐ 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:

Kobert Jehnex

3/5/08

FILED