

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2007 8:00 am
Secretary of State

04-06-2007 90037 019 ****61.25

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DOCUMENT # 747359 1. Entity Name VENTURA CONDOMINIUM ASSOCIATION, INC.																																																																																																																	
Principal Place of Business ATTN: MARY LARRANCE , PROPERTY MANAGER 2301 SOUTH OCEAN BLVD., UNIT #A-2 BOCA RATON, FL 33432 Attn: Gemma Izaguirre, Mgr.			Mailing Address C/O TRICOM MANAAGEMENT INC 1300 N. KELLOGG DRIVE SUITE B ANAHEIM, CA 92807 US																																																																																																														
2. Principal Place of Business - No P.O. Box #		3. Mailing Address																																																																																																															
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03292007 Chg-NP CR2E037 (12/06)																																																																																																													
City & State		City & State		4. FEI Number 59-2171973																																																																																																													
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																													
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																																																																																													
GURTHRIE, BILL BAKER & HOSTETLER 200 S. ORANGE AVENUE, SUITE 2300 SUN BANK, FL 32801				Name Street Address (P.O. Box Number is Not Acceptable) City FL 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>																																																																																																																	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																													
Make check payable to Florida Department of State																																																																																																																	
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">VP</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>SCHECHTER, HERBERT</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1300 KELLOGG DR STE B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>ANAHEIM, CA 92807</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VPD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>FINK, MELVIN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1300 KELLOGG DR STE B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>ANAHEIM, CA 92807</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CAVANAGH, PATRICK</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1300 KELLOGG DR STE B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>ANAHEIM, CA 92807</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BOWCOCK, BRIAN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1300 KELLOGG DR STE B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>ANAHEIM, CA 92807</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CARTER, DOUG</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1300 KELLOGG DR, STE B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>ANAHEIM, CA 92807</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">Treasurer</td> <td style="width: 20%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>Lutzker, Geri</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1300 Kellogg Dr., Ste. B</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Anaheim, CA. 92807</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	VP	<input type="checkbox"/> Delete	NAME	SCHECHTER, HERBERT		STREET ADDRESS	1300 KELLOGG DR STE B		CITY - ST - ZIP	ANAHEIM, CA 92807		TITLE	VPD	<input type="checkbox"/> Delete	NAME	FINK, MELVIN		STREET ADDRESS	1300 KELLOGG DR STE B		CITY - ST - ZIP	ANAHEIM, CA 92807		TITLE	T	<input type="checkbox"/> Delete	NAME	CAVANAGH, PATRICK		STREET ADDRESS	1300 KELLOGG DR STE B		CITY - ST - ZIP	ANAHEIM, CA 92807		TITLE	PD	<input type="checkbox"/> Delete	NAME	BOWCOCK, BRIAN		STREET ADDRESS	1300 KELLOGG DR STE B		CITY - ST - ZIP	ANAHEIM, CA 92807		TITLE	S	<input type="checkbox"/> Delete	NAME	CARTER, DOUG		STREET ADDRESS	1300 KELLOGG DR, STE B		CITY - ST - ZIP	ANAHEIM, CA 92807		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Lutzker, Geri		STREET ADDRESS	1300 Kellogg Dr., Ste. B		CITY - ST - ZIP	Anaheim, CA. 92807		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Brian Bowcock, 3-30-07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																	