

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748786

FILED
Apr 15, 2009
Secretary of State

Entity Name: VENETIAN ARMS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1258 BARBARA DR
VENICE, FL 34285 US

New Principal Place of Business:

1258 BARBARA DRIVE
VENICE, FL 34285 US

Current Mailing Address:

1258 BARBARA DR 203
VENICE, FL 34285 US

New Mailing Address:

1258 BARBARA DRIVE #203
VENICE, FL 34285 US

FEI Number: 59-2444178

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AMMEND, KATHLEEN G
1258 BARBARA DR 203
VENICE, FL 34292 US

Name and Address of New Registered Agent:

AMMEND, KATHLEEN G
1258 BARBARA DR #203
VENICE, FL 34292 US

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:

04/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AMMEND, KATHLEEN
Address: 1258 BARBARA DR 203
City-St-Zip: VENICE, FL 34285

Title: T () Delete
Name: PATTEN, JOHN
Address: 1258 BARBARA DR #207
City-St-Zip: VENICE, FL 34285

Title: P () Delete
Name: GIACCOMAZZI, TULLIO
Address: 708 EDGEMERE LN
City-St-Zip: SARASOTA, FL 34242

Title: S () Delete
Name: BEIMEL, BARBARA
Address: 910 UCILLE AVE
City-St-Zip: NOKOMIS, FL 34275

Title: VP (X) Delete
Name: CAREY, BRIAN
Address: 1258 BARBARA DR #104
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GIACCOMAZZI, TULLIO
Address: 708 EDGEMERE LANE
City-St-Zip: SARASOTA, FL 34242

Title: DV (X) Change () Addition
Name: CAREY, BRIAN K
Address: 1258 BARBARA DRIVE #104
City-St-Zip: VENICE, FL 34285

Title: DT (X) Change () Addition
Name: AMMEND, KATHLEEN G
Address: 1258 BARBARA DRIVE #203
City-St-Zip: SARASOTA, FL 34285

Title: D (X) Change () Addition
Name: LAWSON, ROBERT C
Address: 1258 BARBARA DRIVE #201
City-St-Zip: VENICE, FL 34285

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: MARTIN TUTTLE

CAM

04/15/2009

Electronic Signature of Signing Officer or Director

Date