## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#749250** 

City-St-Zip:

NORTH MIAMI, FL 33181

lame: VENICE LANE INC

FILED Apr 15, 2009 Secretary of State

Entity Name: VENICE LANE, INC.						
Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	VENICE LANE IAMI, FL 33181		10034 W. Î	C/O CCM, INC. 10034 W. MCNAB ROAD TAMARAC, FL 33321		
Current M	lailing Address	<b>s:</b>	New Maili	New Mailing Address:		
1765 VENICE LANE NORTH MIAMI, FL 33181			C/O CCM, INC 10034 W. MCNAB ROAD TAMARAC, FL 33321			
FEI Number: 59-1987599 FEI Number Applied For ( )		FEI Number Not Applicable ( ) Certificate of Status Desire		Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
	ENJAMIN R ES 25TH ST. #200 33161 US	SQ.				
	named entity s e of Florida.	ubmits this statement for the բ	ourpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Ag	ent	Date		
OFFICERS	S AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P/D () GIFFORD, DENI 1765 VENICE LA NORTH MIAMI, F	NE #1E	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S/D () MCCARTHY, DA 1755 VENICE LA NORTH MIAMI, F	NE #1W	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T/D () RESTAINO, VIC 1765 VENICE LA NORTH MIAMI, F	NE #7E	Title: Name: Address: City-St-Zip:	FELDMAN, F 1755 VENICI	(X) Change()Addition RICHARD E LANE #10W MI, FL 33181	
Title: Name: Address: City-St-Zip:	D (X) FELDMAN, RICH 1755 VENICE LA NORTH MIAMI, F	NE #10W	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address:		Delete KONSTANTINOS NE #4E	Title: Name: Address:		( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: DENNIS GIFFORD P/D 04/15/2009