

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750346

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** VENETIAN ISLANDS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

238 EAST SAN MARINO DRIVE  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 398415  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 65-0912155 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

TOMLIN, CLAIRE  
238 E SAN MARINO DRIVE  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LIEBOWITZ, MATTHEW  
Address: ONE S.E. THIRD AVE. STE. 1450  
City-St-Zip: MIAMI, FL 33131

Title: VPD ( ) Delete  
Name: KUPERMAN, JORGE  
Address: 620 WEST DILIDO DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD ( ) Delete  
Name: DARDEN, COLGATE  
Address: 510 WEST DILIDO DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Delete  
Name: TOMLIN, CLAIRE  
Address: 238 EAST SAN MARINO DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: DARDEN, COLGATE  
Address: 610 W. DILIDO DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: SD (X) Change ( ) Addition  
Name: FRYD, MICHAEL  
Address: 523 MICHIGAN AVENUE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: TD (X) Change ( ) Addition  
Name: TOMLIN, CLAIRE  
Address: 238 E. SAN MARINO DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

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: CLAIRE TOMLIN

TD

05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date