## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 750346 Secretary of State

Entity Name: VENETIAN ISLANDS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

238 EAST SAN MARINO DRIVE 440 WEST DILIDO DRIVE MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

PO BOX 398415 MIAMI BEACH, FL 33139

FEI Number: 65-0912155 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TOMLIN, CLAIRE

238 E SAN MARINO DRIVE

MIAMI BEACH, FL 33139 US

CARNEY, ELEANOR J

440 WEST DILIDO DRIVE

MIAMI BEACH, FL 33139 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: ELEANOR J. CARNEY 09/04/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED

Title: PD () Delete Title: P (X) Change () Addition Name: DARDEN, COLGATE Name: CARNEY, ELEANOR Address: 440 W. DILIDO DRIVE

Address: 610 W. DILIDO DRIVE Address: 440 W. DILIDO DRIVE

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 US

Title: SD ( ) Delete Title: S (X) Change ( ) Addition Name: FRYD, MICHAEL Name: DUTCHER, SCOTT

Address: 523 MICHIGAN AVENUE Address: 405 EAST SAN MARINO DRIVE City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 US

Title: TD ( ) Delete Title: T (X) Change ( ) Addition Name: TOMLIN, CLAIRE Name: BRENDEL, JUERGEN

Address: 238 E. SAN MARINO DRIVE Address: 440 EAST RIVO ALTO DRIVE City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 US

Title: ( ) Delete Title: VP ( ) Change (X) Addition

Name:Name:RIGG, MATTHEWAddress:Address:18 EAST DILIDO DRIVECity-St-Zip:City-St-Zip:MIAMI BEACH, FL 33139 US

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: ELEANOR J. CARNEY P 09/04/2009