

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90319 020 ****61.25

DOCUMENT # **757189**

1. Entity Name
Venetian Villas Condo Assoc Inc



Principal Place of Business
**4350 NW 19TH AVE
STE C
POMPANO BEACH FL 33064
US**

Mailing Address
**P O BOX 97-0069
BOCA RATON FL 33497-0069
US**

50039181



1st MOORE CR2E037 (10/04)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number **59-214090**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**RESIDENTIAL MANAGEMENT CONCEPTS
4350 NW 19TH AVE STE C
POMPANO BEACH FL 33064**

7. Name and Address of New Registered Agent
Name **GARY PALOMBI**
Street Address (P.O. Box Number is Not Acceptable)
4350 NW 19th Ave Ste C
City **Pompano Bch** FL Zip Code **33064**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	Giacomo Federico	550 NE 21 Ave #11	Deerfield Bch FL 33441		
	Gail Gardner	550 NE 21 Ave #14	Deerfield Bch FL 33441		
	ERNEST KOEHLER	550 NE 21 Ave #20	Deerfield Bch FL 33441		
	LAWRENCE BIROTA	550 NE 21 Ave #12	Deerfield		
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Eric Anderson

Date **4/13/05**

Daytime Phone #