2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759605

FILED Apr 06, 2009 Secretary of State

Entity Name: VENICE AREA BOARD OF REALTORS, INC.

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

680 SUBSTATION RD C/O MARLENE MERKLE VENICE, FL 34285

Current Mailing Address: New Mailing Address:

680 SUBSTATION RD C/O MARLENE MERKLE VENICE, FL 34285

FEI Number: 59-6152556 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:

MERKLE, MARLENE S. 680 SUBSTATION RD VENICE, FL 34285

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES PRES (X) Change () Addition () Delete

STEPHEN, LINGLEY Name: BARBARA, SAPUTO Name: 8307 S. TAMIAMI TRAIL Address: P O BOX 476 Address: City-St-Zip: OSPREY, FL 34229 City-St-Zip: ENGLEWOOD, FL 34295

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

SAPUTO, BARBARA Name: STEWART, ALMA G Name: Address: 4240 S. TAMIAMI TRAIL Address: 1378 CLUBVIEW CT City-St-Zip: VENICE, FL 34293 City-St-Zip: VENICE, FL 34292

Title: TREA () Delete Title: () Change () Addition

LARAIN, ROXANNA Name: Name: 1335 LEAWOOD RD Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip:

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

Name: PHELPS, ERICK Name: MILLER, GARY 121 N. AUBURN ROAD #24 Address: 2051 ENGLEWOOD RD Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: VENICE, FL 34292

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: BARBARA SAPUTO **PRES** 04/06/2009