

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000230

FILED  
Mar 28, 2006  
Secretary of State

**Entity Name:** VENTURES INTERNATIONAL ASSOCIATION, INC.

**Current Principal Place of Business:**

5839 51ST ST. S.  
ST. PETERSBURG, FL 33715

**New Principal Place of Business:**

**Current Mailing Address:**

5839 51ST STREET S.  
ST. PETERSBURG, FL 33715

**New Mailing Address:**

**FEI Number:** 72-0956258

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HYLAND, JAMES M JR  
5839 51ST STREET S.  
SAINT PETERSBURG, FL 33715 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: PTD ( ) Delete  
Name: HYLAND, JAMES M JR  
Address: 5839 51ST ST. S.  
City-St-Zip: SAINT PETERSBURG, FL 33715

Title: VSD ( ) Delete  
Name: HYLAND, JAMES M III  
Address: 5203 PITT STREET  
City-St-Zip: NEW ORLEANS, LA 70115

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES M HYLAND, JR

PTD

03/28/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date