2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 09, 2005 8:00 am Secretary of State

02-09-2005 90029 032 ****61.25

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DOCUMENT	#	N000	000	00360)
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1. Entity Name SORRENTO AT VENETIAN ISLES (POD G) HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 1013 N STATE RD #7 WEST PALM BEACH, FL 33411

C/O G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD. STE 201

LAKE WORTH, FL 33463

3. Mailing Address	<u> </u>
G.R.S. MANAGEMENT ASSOCIATES, INC.	

2. Principal P	lace of Business		1	ing Address					8 III 1 IIII 1 III 1 IIII 1 III 1 II		1183 1 BUIN BUIN	
3.R.S.MANA	GEMENT ASSO	SOCIATES, INC. VD. SUITE 309 EL 33463 G.R.S. MANAGEMENT ASSOCIATES, INC. 3900 WOODLAKE BLVD. SUITE 309 EL 33463			01052005	Chg-NP	CR2E0	37 (10/03)				
CILARE	WORTH, FL	33463	- Cir	Part MOHI	H, FL 03403			4. FEI Numbe 65-0982				plied For Applicable
Zip	C	ountry	Zip	Zip Country			5. Certificate	of Status Desired		\$8.75 Add Fee Required		
	6. Name and A	Address of Current	Registere	d Agent				7. Name and	Address of New	Registered	Agent	
GAS MAN	AGEMENT AS	soc	· · · · · · ·			Name	<u> 10e</u>	2 Gilk	sert-	· · ·	, 	•
3800 WOODLAKE BLVD					Street Address (P.O. Box Number is Not Acceptable)							
JOE GILBERT STE 201 LAKE WORTH, FL 33463					G.Fi	G.R.S. MANAGEMENT ASSOCIATES, INC.						
LAKE WO	XIII, FL 3340.	,							LVD, SUITE		7:- 0-4	
						City	LAK	E WORTH	, FL 33463	FL	Zip Code	'
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Filing 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 DI	RECTORS		11.		, <i>, , , ,</i>	ADDITIONS/CH/	ANGES TO OFFIC	ERS AND D		
TITLE	PD POVE			Delete	TITL						Change	Addition
NAME STREET ADDRESS	BOYD, MIKE 8071 BELLAFL	ODE WAY	•		NAM	eet address				Ω	1	'
CITY-ST-ZIP		ACH, FL 33437				-ST-ZIP		ree	alla	phe	d	
TITLE	VP			Delete	IIIL						Change	Addition
NAME	SILVIA, MOE			N Delete	NAM	-			L_4		A	
STREET ADDRESS	8186 BELLAFL	ORE WAY			STRE	EET ADDRESS		00 0	7700	1100	J	
CITY-ST-ZIP	BOYNTON BE	ACH, FL 33437			CITY	-ST-ZIP			Cuc		<i>X</i>	
TITLE	2VP			Delete	TITL	E		<u>></u>			Change	☐ Addition
NAME	SCHNEIDRA, I	RITA .		^	NAM	Æ		~ ^	-11	1		
STREET ADORESS	8042 BELLAFL			.		EET ADDRESS		Sel-	a.T. a	eli-e		
CITY-ST-ZIP	BOYNTON BE	ACH, FL 33437			CITY	-ST-ZIP						
TITLE	S	140010		Delete	TITL	•			<i>/</i>		Change	Addition
NAME STREET ADDRESS	NODELMAN, F 8075 BELLAFL				NAM	ie Eet address					, .	
CITY-ST-ZIP		ACH, FL 33437				-ST-ZIP						
TITLE	T			☐ Delete	TITL				·		Change	Addition
NAME	LEVY, RICK			LJ Delete	NAM						□ cuange	L. Addition
STREET ADDRESS	8029 PISA DRI	IVE ,				EET ADDRESS						
CITY-ST-ZIP		ACH, FL 33437				-ST-ZIP						
TITLE				☐ Delete	TITL	E					☐ Change	Addition
NAME				•	NAX	KE .					•	-
STREET AODRESS					\$TR	EET ADDRESS	1					
CITY-ST-7IP	i				CID	/-ST-7IP	1					

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:	Mih Boyal MIKE	BOYD Presid	INT 1/31/05	
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGN	NG OFFICER OR DIRECTOR	7 Date	Daytime Phone #

ATTACHMENT

DOCUMENT NUMBER N0000000360; SORRENTO

40015469

VP2

ADD

KATZ, MARK

8014 BELLAFIORE WAY BOYNTON BEACH, FL 33437

CHANGE SCHNEIDER, RITA J.

8042 BELLAFIORE WAY **BOYNTON BCH, FL 33437**

VP1

CHANGE SILVER, MORRIS

8186 BELLAFIORE WAY

BOYNTON BCH, FL 33437

Change Boyd, mike

8071 Bellatione Way

Boynton Beach, FL 33437

Please nexte the "I", not"L" in Bellatione.

Thanks.