2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 02, 2009
Secretary of State

DOCUMENT# N00000001318

Entity Name: VENEZIA LAS OLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

111 S.E. 8TH AVE
FT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

111 S.E. 8TH AVE
FT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 65-1146289 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EISINGER, DENNIS
4000 HOLLYWOOD BLVD
SUITE 265 SOUTH
HOLLYWOOD, FL 33021 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: P ( ) Delete
Name: SOLOMON, DAVID
Address: 111 SE 8TH AVE #701
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP ( ) Delete
Name: PALIN, TRUDY
Address: 111 SE 8TH AVE #1203
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: ST ( ) Delete
Name: GRAVES, KEITH
Address: 111 SE 8TH AVE #602
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: PALIN, TRUDY
Address: 111 SE 8TH AVE #1203
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP (X) Change ( ) Addition
Name: ORTIZ, LINDA
Address: 111 SE 8TH AVE #706
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: ST (X) Change ( ) Addition
Name: MILLER, ROBIN
Address: 111 SE 8TH AVE #1002
City-St-Zip: FORT LAUDERDALE, FL 33301

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: TRUDY PALIN PRES 06/02/2009

Electronic Signature of Signing Officer or Director — Date