

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007760

FILED
Apr 25, 2005
Secretary of State

Entity Name: SOUTH VENICE RESIDENT COALITION, INC.

Current Principal Place of Business:

480 SOUTHLAND ROAD
VENICE, FL 34293

New Principal Place of Business:

Current Mailing Address:

480 SOUTHLAND ROAD
VENICE, FL 34293

New Mailing Address:

FEI Number: 01-0718744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HURST, PATRICIA
480 SOUTHLAND ROAD
VENICE, FL 34293 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: PD () Delete
Name: HURST, JAMES M JR.
Address: 480 SOUTHLAND ROAD
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: WOODLEY, PAT
Address: 471 URBANA ROAD
City-St-Zip: VENICE, FL 34293

Title: SD () Delete
Name: HURST, PATRICIA
Address: 480 SOUTHLAND ROAD
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: BURGESS, ALICE
Address: 755 PONDEROSA ROAD
City-St-Zip: VENICE, FL 34293

Title: VD () Delete
Name: ZELICK, SANDIE
Address: 1091 CONVERT RD.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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 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: PAT WOODLEY

TD

04/25/2005

Electronic Signature of Signing Officer or Director

Date