

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 08, 2007 8:00 am**  
**Secretary of State**

02-08-2007 90040 013 \*\*\*\*61.25

DOCUMENT # N03000007760

1. Entity Name  
THE WATERFRONT ON VENICE ISLAND BUILDING A  
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business  
333 SOUTH TAMiami TRAIL SUITE 101  
VENICE, FL 34285

Mailing Address  
333 SOUTH TAMiami TRAIL SUITE 101  
VENICE, FL 34285

40011514



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102007

Chg-NP

CR2E037 (12/06)

4. FEI Number  
74-3115825

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PARRISH, JAYNE E  
333 SOUTH TAMiami TRAIL SUITE 101  
VENICE, FL 34285

7. Name and Address of New Registered Agent

Name *Argus Management of Venice*  
Street Address (P.O. Box Number is Not Acceptable)  
*181 Center Rd*  
*Venice FL 34285*  
City *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

*Vincent E. Campbell*  
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2007

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 DIRECTORS

TITLE DP  
NAME PARRISH, JAYNE E  
STREET ADDRESS 333 SOUTH TAMiami TRAIL SUITE 101  
CITY-ST-ZIP VENICE, FL 34285 ☒ Delete

TITLE DV  
NAME MILLER, MICHAEL W  
STREET ADDRESS 333 SOUTH TAMiami TRAIL SUITE 101  
CITY-ST-ZIP VENICE, FL 34285 ☒ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP  
NAME CALLA, KIM  
STREET ADDRESS 147A TAMPA AVE  
CITY-ST-ZIP VENICE FL 34285 ☐ Change ☒ Addition

TITLE DV  
NAME HARTLEY, MICHAEL  
STREET ADDRESS 147A TAMPA AVE  
CITY-ST-ZIP VENICE FL 34285 ☐ Change ☒ Addition

TITLE SV  
NAME LUKON, GEORGE  
STREET ADDRESS 147A TAMPA AVE  
CITY-ST-ZIP VENICE FL 34285 ☐ Change ☒ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 *Kim M Calla*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-2007

Date

Daytime Phone #