

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010497

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** VENETIAN FALLS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8695 COLLEGE PARKWAY  
SUITE 1274  
FT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

8695 COLLEGE PARKWAY  
SUITE 1274  
FT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 42-1613041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LISTON, DAVID  
8695 COLLEGE PARKWAY  
SUITE 1274  
FT MYERS, FL 33919 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  
Name: FOSTER, ART  
Address: 1956 BATELLO  
City-St-Zip: VENICE, FL 34292

Title: VPD  
Name: MONIZ, BILL  
Address: 11210 CAMPAZZO  
City-St-Zip: VENICE, FL 34292

Title: SD  
Name: FRIES, BOB  
Address: 20289 PEZZANA  
City-St-Zip: VENICE, FL 34292

Title: TD  
Name: ZIELINSKI, TOM  
Address: 1788 BATELLO  
City-St-Zip: VENICE, FL 34292

Title: D  
Name: GOLDMAN, JORDAN  
Address: 8695 COLLEGE PARKWAY, SUITE 1724  
City-St-Zip: FT. MYERS, FL 33919

I hereby 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 all other like empowered.

SIGNATURE: ARTHUR FOSTER

PD

03/30/2012

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

\_\_\_\_\_  
Date