

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 30, 2012
Secretary of State

DOCUMENT# N04000008882

Entity Name: PARKSIDE TOWNHOMES AT VENETIAN BAY HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**424 LUNA BELLA LN.
SUITE 135-1
NEW SMYRNA BEACH, FL 32168**New Principal Place of Business:**1034 RIDGEWOOD AVE.
SUITE 1
HOLLY HILL, FL 32117**Current Mailing Address:**424 LUNA BELLA LN.
SUITE 135-1
NEW SMYRNA BEACH, FL 32168**New Mailing Address:**1034 RIDGEWOOD AVE.
SUITE 1
HOLLY HILL, FL 32117**FEI Number:** 20-1649791**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**JOHNSON, JERRY S
424 LUNA BELLA LN.
SUITE 135
NEW SMYRNA BEACH, FL 32168 US**Name and Address of New Registered Agent:**TYLER PROPERTY MANAGEMENT LLC
1034 RIDGEWOOD AVE.
SUITE 1
HOLLY HILL, FL 32117 US

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: S. D. ELDER, III

08/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MESSER, JEFF
Address: 3571 ROMEA CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP
Name: BRUZZESE, MYRNA
Address: 3558 ROMEA CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: S
Name: BARENBAUM, MARY J
Address: 3611 TRESTO STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T
Name: EVANS, MARY K
Address: 3396 TORRE BLVD
City-St-Zip: NEW SMYRNA, FL 32168

Title: D
Name: PUGLISI, LORI
Address: 3649 CASALTA CIRCLE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D
Name: GRABNER, SCOTT H
Address: 3631 CASALTA CIRCLE
City-St-Zip: NEW SMYRNA, FL 32168

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: JEFF MESSER

P

08/30/2012

Electronic Signature of Signing Officer or Director

Date