

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001048

FILED
May 20, 2008
Secretary of State

Entity Name: VILLA VENEZIA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1121 BEL AIR DR #4
HIGHLAND BCH, FL 33487

New Principal Place of Business:

1121 BEL AIR DR
#4
HIGHLAND BCH, FL 33487

Current Mailing Address:

1121 BEL AIR DR #4
HIGHLAND BCH, FL 33487

New Mailing Address:

1121 BEL AIR DR
#4
HIGHLAND BCH, FL 33487

FEI Number: 20-4677076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHMIDT, DAVID W
100 NE FIFTH AVE
DELRAY BCH, FL 33483 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: D () Delete
Name: CANNIZZARO, JOSEPH R
Address: 1121 BEL AIR DR #4
City-St-Zip: HIGHLAND BCH, FL 33487

Title: D () Delete
Name: CANNIZZARO, DOLORES M
Address: 1121 BEL AIR DR #4
City-St-Zip: HIGHLAND BCH, FL 33487

Title: D () Delete
Name: SCHMIDT, DAVID W
Address: 100 NE FIFTH AVE STE A-1
City-St-Zip: DELRAY BCH, FL 33483

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:

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: JOSEPH CANNIZZARO

D

05/20/2008

Electronic Signature of Signing Officer or Director

Date