

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003033

FILED
Mar 31, 2009
Secretary of State

Entity Name: TIZIANO I AT VENETIAN GOLF & RIVER CLUB PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BETH CALLANS MANAGEMENT CORPORATION
595 BAY ISLES ROAD
LONGBOAT KEY, FL 34228

New Principal Place of Business:

C/O ARGUS PROPERTY MANAGEMENT, INC
2477 STICKNEY POINT ROAD SUITE 118A
SARASOTA, FL 34231

Current Mailing Address:

C/O BETH CALLANS MANAGEMENT CORPORATION
595 BAY ISLES ROAD
LONGBOAT KEY, FL 34228

New Mailing Address:

C/O ARGUS PROPERTY MANAGEMENT, INC
2477 STICKNEY POINT ROAD SUITE 118A
SARASOTA, FL 34231

FEI Number: 20-2713632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETH CALLANS MANAGEMENT CORPORATION
595 BAY ISLES ROAD - STE. 200
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

ARGUS PROPERTY MANAGEMENT, INC
2477 STICKNEY POINT ROAD SUITE 118A
SARASOTA, FL 34231 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: WALT HAMMERLING

03/31/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHANDLER, MARJORIE
Address: 250 PADOVA WAY
City-St-Zip: NO. VENICE, FL 34275

Title: STD () Delete
Name: ROACH, PETER
Address: 273 PADOVA WAY
City-St-Zip: NOKOMIS, FL 34275

Title: VPD () Delete
Name: SANTORO, DOMINIC
Address: 270 PADOVA WAY
City-St-Zip: NO. VENICE, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: FITZGERALD, DIANE
Address: 125 MESTRE PLACE
City-St-Zip: NORTH VENICE, FL 34275

Title: TD (X) Change () Addition
Name: SANTORO, DOMINIC
Address: 270 PADOVA WAY
City-St-Zip: NO. VENICE, FL 34275

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: MARGE CHANDLER

PD

03/31/2009

Electronic Signature of Signing Officer or Director

Date