

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006763

FILED
Mar 01, 2007
Secretary of State

Entity Name: VENICE NEIGHBORHOODS COALITION, INC.

Current Principal Place of Business:

421 DARLING DRIVE
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

421 DARLING DRIVE
VENICE, FL 34285

New Mailing Address:

FEI Number: 34-2066079

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANG, SUZANNE
421 DARLING DRIVE
VENICE, FL 34285 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 () Delete
Name: LANG, SUZANNE
Address: 421 DARLING DRIVE
City-St-Zip: VENICE, FL 34285

Title: VD () Delete
Name: QUANDT, EARL
Address: 421 DARLING DRIVE
City-St-Zip: VENICE, FL 34285

Title: STD () Delete
Name: VAUGHN, TED
Address: 204 RIO TERRA
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: BARRITT, MAXINE
Address: 1041 CAPRI ISLES BLVD. #107
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: MILLER, MARGARET
Address: 343 SHORE ROAD
City-St-Zip: VENICE, FL 34285

Title: D () Delete
Name: NEWMAN, WILLIAM
Address: 906 GOLDEN BEACH BLVD.
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: QUANDT, EARL
Address: 218 RIO TERRA
City-St-Zip: VENICE, FL 34285

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

Title: D (X) Change () Addition
Name: BARRITT, MAXINE
Address: 1041 CAPRI ISLES BLVD. #107
City-St-Zip: VENICE, FL 34285

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 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: SUZANNE LANG

PD

03/01/2007

Electronic Signature of Signing Officer or Director

Date