2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28894

FILED Apr 22, 2008 Secretary of State

Entity Name: VENETIAN HARMONY CHAPTER OF SWEET ADELINES INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business: 303 KENSINGTON STREET PORT CHARLOTTE, FL 33954 **Current Mailing Address: New Mailing Address:** PO BOX 1133 VENICE, FL 34284 FEI Number: 59-2409715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRENIER, GLORIA L 4211 CASCADE FALLS DR. SARASOTA, FL 34243 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BRADY, GRACE Name: Name: 30 GRAND PALMS BLVD Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: Title: (X) Change () Addition () Delete CONKLIN, PRISCILLA Name: KING, MARTHA Name: Address: 413 VASTO DR Address: 2085 SANDHILL LANE City-St-Zip: VENICE, FL 34285 City-St-Zip: NOKOMIS, FL 34275 Title: () Delete Title: (X) Change () Addition NEYEDLY, BETTY JEAN FRANK, DAMARIS Name: Name: 5800 SABAL TRACE #102 804 S. GREEN CIRCLE Address: Address: City-St-Zip: NORTH PORT, FL 34293 City-St-Zip: VENICE, FL 34285 Title: () Delete Title: () Change () Addition MURPHEY, ANN Name: Name: 5496 WHITE IBRS DR Address: Address: City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRENIER, GLORIA GRENIER, GLORIA Name: Name: 3728 SURREY LANE 4211 CASCADE FALLS DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34243 Title: () Delete Title: (X) Change () Addition MANVILLE, NANCY WILLIAMS, LISA Name: Name: Address: 1251 NORTH BASIN LN Address: 1132 AUBURN STREET #110 SARASOTA, FL 34242 CLEARWATER, FL 33756 City-St-Zip: 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: GLORIA GRENIER D 04/22/2008