2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jun 12, 2009
Secretary of State

DOCUMENT# N32353

Entity Name: ROYAL VENICE, INC.

Current Principal Place of Business:

1614 NICOLLETT AVE.
NORTH PORT, FL 34286 US

New Principal Place of Business:

2799 PHOENIX PALM TERR
NORTH PORT, FL 34288 US

Current Mailing Address:

C/O BRENT DYKSTRA
201 CENTER RD
VENICE, FL 34292 US

New Mailing Address:

C/O BRENT DYKSTRA
PO BOX 6807
NORTRH PORT, FL 34290 US

FEI Number: 65-0119759 **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:

ARISTIZABEL, GEORGE
201 CENTER RD
VENICE, FL 34285 US

Name and Address of New Registered Agent:

ARISTIZABEL, GEORGE
2799 PHOENIX PALM TERR
NORTH PORT, FL 34288 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: GEORGE ARISTIZABEL 06/12/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: DYKSTRA, BRENT
Address: 201 CENTER RD
City-St-Zip: VENICE, FL 34292

Title: SD ( ) Delete
Name: STUART, ANTHONY C
Address: 940 S DORAL LANE
City-St-Zip: VENICE, FL 34293

Title: PD ( ) Delete
Name: ARISTIZABEL, GEORGE
Address: 1526 EWING ST
City-St-Zip: NOKOMIS, FL 34275

Title: VPD ( ) Delete
Name: DETTMANN, DAVID
Address: 201 CENTER RD
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: SHAND, ROBERT
Address: 849 COUNTRY CLUB CIR
City-St-Zip: VENICE, FL 34293

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: BRENT DYKSTRA TD 06/12/2009
Electronic Signature of Signing Officer or Director Date