

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2005 8:00 am
Secretary of State

02-08-2005 90013 043 ****61.25

DOCUMENT # N39449

1. Entity Name

VENICE CENTER OWNERS ASSOCIATION, INC.



Principal Place of Business

1070 DELACROIX CIRCLE
NOKOMIS FL 34275
US

Mailing Address

1070 DELACROIX CIRCLE
NOKOMIS FL 34275
US

2. Principal Place of Business

722 Shamrock Blvd.

3. Mailing Address

722 Shamrock Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Venice, FL

City & State

Venice, FL

4. FEI Number

65-0320966

Applied For

Not Applicable

Zip

34293

Country

USA

Zip

34293

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CONNELLY, JAMES A.
1070 DELACROIX CIRCLE
NOKOMIS FL 34275

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
CONNELLY, JAMES A
1070 DELACROIX CIRCLE
NOKOMIS FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
BRADY, RICHARD WILSON
315 PINE GLEN WAY
ENGLEWOOD FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
BEACOM, ROGER
241 SORRENTO RANCH DR
NOKOMIS FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
JOELSON, RAY R
638 BIRD BAY DR. E, #212
VENICE FL 34292 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
BEACOM ROGER
418 OTTER CREEK DR
VENICE, FL 34292 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James A. Connelly

Date

2/2/05

Daytime Phone #

(941) 497-2353