

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39670

FILED
Apr 10, 2008
Secretary of State

Entity Name: VENICE-ENGLEWOOD BAR ASSOCIATION, INC.

Current Principal Place of Business:

1001 AVENIDA DEL CIRCO
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

1001 AVENIDA DEL CIRCO
VENICE, FL 34285

New Mailing Address:

FEI Number: 65-0350725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOONE, STEPHEN K.
1001 AVENIDA DEL CIRCO
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: DP () Delete
Name: BNAN, DEAN
Address: 609 S TAMIAMI TR
City-St-Zip: VENICE, FL 34285

Title: DT () Delete
Name: WILSON, M M
Address: 2383 SO TAMIAMI TRL. ST D
City-St-Zip: VENICE, FL 34293

Title: D () Delete
Name: DOUGLAS, CATHRYN
Address: 18501 MURDOCK CIR, 6TH FLOOR
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: DS () Delete
Name: STAAS, KEVIN
Address: 355 W. VENICE AVE
City-St-Zip: VENICE, FL 34285

Title: DV (X) Delete
Name: BROOME, JULIAN F JR.
Address: 118 SHAMROCK BLVD.
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: RHEINGANS, MATTHEW
Address: 355 WEST VENICE AVE.
City-St-Zip: VENICE, FL 34285

Title: DT (X) Change () Addition
Name: RHEINGANS, MATTHEW
Address: 355 WEST VENICE AVE.
City-St-Zip: VENICE, FL 34285

Title: DV (X) Change () Addition
Name: NELMS, BRENDA
Address: 355 WEST VENICE AVENUE,
City-St-Zip: VENICE, FL 34285

Title: DS (X) Change () Addition
Name: STAAS, KEVIN
Address: 245 N. TAMIAMI TRAIL, STE. F
City-St-Zip: VENICE, FL 34285

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: KEVIN G. STAAS

DS

04/10/2008

Electronic Signature of Signing Officer or Director

Date