

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N40302 (4)**

1. Corporation Name

**VENICE TAXPAYERS LEAGUE, INC.**



Principal Place of Business

Mailing Address

P O BOX 118  
VENICE FL 34284

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VENICE FL 34284

3. Date Incorporated or Qualified  
**10/08/1990**

3a. Date of Last Report  
**03/22/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**65-0265711**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KREBS, EDWARD C, JR  
615 LA GUNA DRIVE  
VENICE FL 34285**

81 Name

**Peake, Charles**

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

**440 Baycrest Drive**

83

84 City

**Venice**

FL

85 Zip Code

**34285**

11. Pursuant to the provisions of Sections 617.052 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.1503, Florida Statutes.

SIGNATURE

*Charles Peake*

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEB 15, 1996**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE  
NAME **KREBS, EDWARD C, JR**  
STREET ADDRESS **615 LA GUNA DRIVE**  
CITY-ST-ZIP **VENICE FL**

1.1 TITLE **President PD** ☒ Change ☐ Addition  
1.2 NAME **Peake, Charles**  
1.3 STREET ADDRESS **440 Baycrest Drive**  
1.4 CITY-ST-ZIP **Venice, FL 34285**

TITLE **DT** ☒ DELETE  
NAME **CROCKETT, LORRAINE**  
STREET ADDRESS **837 WHITECAP CIR**  
CITY-ST-ZIP **VENICE FL**

2.1 TITLE **Vice President DV** ☐ Change ☐ Addition  
2.2 NAME **Stout, Roy**  
2.3 STREET ADDRESS **812 Rialto**  
2.4 CITY-ST-ZIP **Venice, FL 34285**

TITLE **D** ☒ DELETE  
NAME **KOSTOCK, ELSIE**  
STREET ADDRESS **1321 FIR AVE**  
CITY-ST-ZIP **VENICE FL**

3.1 TITLE **Secretary DS** ☐ Change ☒ Addition  
3.2 NAME **Weinberg, Geri**  
3.3 STREET ADDRESS **740 Bird Bay Drive**  
3.4 CITY-ST-ZIP **Venice, FL 34292**

TITLE **DS** ☐ DELETE  
NAME **ZEJMIOWICZ, MARION**  
STREET ADDRESS **730 NOKOMIS AVE**  
CITY-ST-ZIP **VENICE FL**

4.1 TITLE **Treasurer DT** ☒ Change ☐ Addition  
4.2 NAME **Krebs, Edward**  
4.3 STREET ADDRESS **615 La Guna Dr.**  
4.4 CITY-ST-ZIP **Venice, FL 34285**

TITLE **DV** ☐ DELETE  
NAME **STOUT, ROY**  
STREET ADDRESS **812 RIALTO**  
CITY-ST-ZIP **VENICE FL**

5.1 TITLE **Director D** ☒ Change ☐ Addition  
5.2 NAME **Zejmowicz, Marion**  
5.3 STREET ADDRESS **730 NOKOMIS AVE**  
5.4 CITY-ST-ZIP **Venice, FL 34285**

TITLE **D** ☐ DELETE  
NAME **PEAKE, CHARLES**  
STREET ADDRESS **440 BAYCREST DR**  
CITY-ST-ZIP **VENICE FL**

6.1 TITLE **Director D** ☐ Change ☒ Addition  
6.2 NAME **Buyer, Walter**  
6.3 STREET ADDRESS **521 Peach St**  
6.4 CITY-ST-ZIP **Venice, FL 34292**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 officer or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13, changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**FEB 15 1996**

CR2E037 (12/95)