2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 22, 2004
Secretary of State

DOCUMENT# N93000001401

Entity Name: VENETIAN CAUSEWAY NEIGHBORHOOD ALLIANCE, INC.

Current Principal Place of Business:

1000 VENETIAN WAY
STE 603
MIAMI, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1602 ALTON ROAD
#27
MAIMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0413703 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BISNO, BARBARA
1000 VENETIAN WAY
STE 603
MIAMI, FL 33139 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: 1VPD ( ) Delete
Name: CHITTY, ROBERT A
Address: 130 W RIVO ALTO DR.
City-St-Zip: MAIMI BEACH, FL 33139

Title: PD ( ) Delete
Name: BISNO, BARBARA
Address: 1000 VENETIAN WAY, APT. 603
City-St-Zip: MIAMI, FL

Title: T ( ) Delete
Name: GORDICH, HELEN M
Address: 1000 VENETIAN WAY, APT. 2102
City-St-Zip: MIAMI, FL

Title: SD ( ) Delete
Name: GORDICK, HELEN M
Address: 1000 VENETIAN WAY
City-St-Zip: MIAMI, FL 33139 US

Title: SVPD ( ) Delete
Name: BALLOU, JOHN
Address: 801 N VENETIAN DR PH D2
City-St-Zip: MIAMI, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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 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: BARBARA K. BISNO PRES 10/22/2004
Electronic Signature of Signing Officer or Director — Date