


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

FILED
Jun 07, 2006 8:00 am
Secretary of State

06-07-2006 90003 004 ****61.25

DOCUMENT # N95000000112
1. Entity Name
VENETIAN MOBILE HOMEOWNERS ASSN.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
VENETIAN MOBILE COURT
Suite, Apt. #, etc.

3. Mailing Address
8475 3rd. LANE NORTH
Suite, Apt. #, etc.

City & State
ST. PETERSBURG FL.

City & State

Zip
33703-2399

Country
PINELLAS

Zip

Country

4. FEI Number

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

40094931
CR2E037B (8/05)

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
MARCUS KREST

Street Address (P.O. Box Number is Not Acceptable)
148 56th TERRACE NORTH

City
ST. PETERSBURG FL

Zip Code
33703

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FEE IS \$61.25
Initial or Amended AR**

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	President Raymond Wilson 312 Barnard Blvd. N St. Petersburg Fl. 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marcus Krest Tres. 148 56th. Terr. N St. Petersburg Fl. 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Len Stokes Sect. 228 Barnard Blv. N St Petersburg Fl 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Janet Haverstock Director 5600 3rd. Way N St. Petersburg Fl 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Louis Fontaine Director 5452 3rd Way N St. Petersburg Fl 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Michael Gladue Director 269 Barnard Blvd. N St. Petersburg Fl 33703	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Marcus B. Krest Tres.* 6-3-06 (727)526-0018