


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007 8:00 am
Secretary of State

03-21-2007 90038 049 ****70.00

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1. Entity Name
VENETIAN MOBILE HOME OWNERS, INC.



Principal Place of Business
**VENTIAN MOBILE COURT
 SAINT PETERSBURG, FL 33703-2399**

Mailing Address
**8475 3RD LANE NORTH
 ST. PETERSBURG, FL 33703 US**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
Donald J. LANDRY
 Suite, Apt. #, etc.
5600 2nd WAY, N
 City, State
St Petersburg, FL
 Zip Country
33703-2399 US



03122007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2504898

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

KREST, MARCUS
148 56TH TERRACE NORTH
SAINT PETERSBURG, FL 33703

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

Filing Fee is \$61.25 Due by May 1, 2007

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	P WILSON, RAYMON 312 BARNARD BLVD. N SAINT PETERSBURG, FL 33703 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KREST, MARCUS 148 56TH TERR. SAINT PETERSBURG, FL 33703 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STOKES, LEN 228 BARNARD BLVD. N SAINT PETERSBURG, FL 33703 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAVERSTOCK, JANET 5600 3RD WAY N. SAINT PETERSBURG, FL 33703 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FONTAINE, LOUIS 5452 3RD WAY N SAINT PETERSBURG, FL 33703 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLADUE, MICHAEL 269 BARNARD BLVD N SAINT PETERSBURG, FL 33703 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LANDRY, Donald 5600 2nd WAY N St Petersburg, FL 33703 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Haverstock, Janet 5600 3rd WAY N. St. Petersburg, FL 33703 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Gaskill, Linda 165 54th Terrace, N St Petersburg, FL 33703 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ginbert, Bill 5622 2nd way N, St. Petersburg, FL 33703 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Beaucage, Andre 219 54th Terrace, N St, Petersburg, FL 33703 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Morgan, Carol 211 Greguville, Ave N St, Petersburg, FL 33703 <input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: **Donald J. Landry** *Donald J. Landry* **3/13/2007** **(508) 579-3828**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

60026376

~~FN 9500000112~~

Box 11 continued

D

Marion Brooks
5638 1st Lane, N
St Petersburg, Fl 33703

(x) Addition

D

Carmen Galloway
5631 3rd Way N,
St Petersburg, Fl 33703

(x) Addition

D

Kiko Sarmentero
5624 2nd Way N
St Petersburg, Fl 33703

(x) Addition