

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2009
Secretary of State

DOCUMENT# N95000000112

Entity Name: VENETIAN MOBILE HOME OWNERS, INC.

Current Principal Place of Business:

VENTIAN MOBILE COURT
SAINT PETERSBURG, FL 337032399

New Principal Place of Business:

5475 3RD LANE NO.
SAINT PETERSBURG, FL 337032399

Current Mailing Address:

MAVIS VAUGHN
213 54TH TERRACE N
SAINT PETERSBURG, FL 337032399 US

New Mailing Address:

FEI Number: 59-2504898 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

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: P () Delete
Name: VAUGHN, MAVIS
Address: 213 54TH TERRACE N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: T () Delete
Name: KREST, MARCUS
Address: 148 56TH TERR.
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: V () Delete
Name: BROOKS, MARION
Address: 5636 1ST LANE N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: S () Delete
Name: GASKILL, LINDA
Address: 165 54TH TERRACE, N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D () Delete
Name: FONTAINE, LOUIS
Address: 5452 3RD WAY N
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D () Delete
Name: GLADUE, MICHAEL
Address: 269 BARNARD BLVD N
City-St-Zip: SAINT PETERSBURG, FL 33703

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: S (X) Change () Addition
Name: GASKILL, LINDA
Address: 5455 3RD WAY NO.
City-St-Zip: SAINT PETERSBURG, FL 33703

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 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: MARCUS KREST

T

05/19/2009

Electronic Signature of Signing Officer or Director

_____ Date