

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 03, 2003 8:00 am**  
**Secretary of State**

03-03-2003 90949 050 \*\*\*\*61.25

**DOCUMENT # N9500000112**

1. Entity Name  
**VENETIAN MOBILE HOME OWNERS, INC.**



Principal Place of Business  
**VENTIAN M/ PARK  
5475 3RD LANE  
ST. PETERSBURG, FL 33703**

Mailing Address  
**VENTIAN M/ PARK  
5475 3RD LANE  
ST. PETERSBURG, FL 33703 US**

00000001



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

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  
**FORD, EDWIN I  
2310 WEST BAY DR.  
LARGO, FL 34640**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
**FL** Zip Code

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

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

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-STATE-ZIP	<b>President</b> <b>HAVERSTOCK, JANET</b> <b>5600 3RD WAY N</b> <b>ST. PETERSBURG, FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>D</b> <b>PELUSO, ANELLO</b> <b>157 54TH TERRACE NORTH</b> <b>ST. PETERSBURG, FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>D</b> <b>LEBLANC, ARTHUR</b> <b>5426 1ST WAY N</b> <b>ST. PETERSBURG, FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>D</b> <b>HAZELWOOD, JACK</b> <b>117 54TH TERRACE N</b> <b>ST. PETERSBURG, FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>D</b> <b>KREST, MARK</b> <b>148 56TH TERRACE N.</b> <b>ST PETERSBURG, FL</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Ex Treasurer</b> <b>EVANS, CHESTER</b> <b>5520 2ND WAY, NORTH</b> <b>ST. PETERSBURG, FL</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>V-President</b> <b>Wilson, Ray</b> <b>181 54th Terrace N</b> <b>St. Petersburg, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Secretary</b> <b>Stokes, Len</b> <b>228 Barnard Blvd. N</b> <b>St Petersburg, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Director</b> <b>Fontaine, Louie</b> <b>172 55th Place N.</b> <b>St Petersburg, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Director</b> <b>Lurette, John</b> <b>5490 1st Way N</b> <b>St Pettersburg, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>DIRECTOR</b> <b>Beaucage, Andre</b> <b>219 54th Terrace N</b> <b>St. Petersburg, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<b>Director</b> <b>Galloway, Carmen</b> <b>5631 3rd Way N</b> <b>St. Petersburg, FL</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: L. P. Stokes Treasurer 26 February 2003 727-521-1398  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP22E037 (10/02)

Attachment 90039751  
#N95000000112

**LISTING OF MEMBERS OF THE BOARD OF VENETIAN MOBILE HOME COURT HOMEOWNER'S ASSOCIATION AS APPROVED AT THE GENERAL MEETING OF January 7, 2003.**

PRESIDENT	Janet Haverstock	5600 3 <sup>rd</sup> Way N	St. Petersburg, FL
V-PRESIDENT	Ray Wilson	181 54 <sup>th</sup> Terrace N	St. Petersburg, FL
SECRETARY	Len Stokes	228 Barnard Blvd N	St. Petersburg, FL
TREASURER	Chet Evans	5520 2 <sup>nd</sup> Way N	St. Petersburg, FL
DIRECTOR	Andre Beaucage	219-54 <sup>th</sup> Terrace N	St. Petersburg, FL
DIRECTOR	Louis Fontaine	172-55 <sup>th</sup> Place N	St. Petersburg, FL
DIRECTOR St. Petersburg, FL	Carman Galloway	5631 3 <sup>rd</sup> Way N	St. Petersburg, FL
DIRECTOR	Stan Harding	6461 1 <sup>st</sup> Way N	St. Petersburg, FL
DIRECTOR	Jack Hazlewood	117 54 <sup>th</sup> Terrace N	St. Petersburg, FL
DIRECTOR	Marcus Krest	148 56 <sup>th</sup> Terrace N	St. Petersburg, FL
DIRECTOR	Art LeBlanc	5426 1 <sup>st</sup> Way N	St. Petersburg, FL
DIRECTOR	John Lurette	5490 1 <sup>st</sup> Way	St. Petersburg, FL
DIRECTOR	Anello Peluso	157 54 <sup>th</sup> Terrace N	St. Petersburg, FL