

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 07, 2008**  
**Secretary of State**

DOCUMENT# N95000003912

**Entity Name:** VENETIAN MANOR CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**934 MICHIGAN AVE  
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**C/O DEVAN MCNALLY, LCAM  
8606 WHITE CAY  
WEST PALM BEACH, FL 33411**New Mailing Address:**BLUE SKY MIAMI  
1680 MICHIGAN AVE, STE 908  
MIAMI BEACH, FL 33139**FEI Number:** 65-0540939**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BIRNHOLZ, MICHAEL ESQ  
1025 KANE CONCOURSE  
SUITE 203  
BAY HARBOR ISLANDS, FL 33154 US**Name and Address of New Registered Agent:**SHEINER, ROBERT M  
1680 MICHIGAN AVE  
STE 908  
MIAMI BEACH, FL 33139 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: RM SHEINER

11/07/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HOUDARD, PHILLIPPE  
Address: 934 MICHIGAN AVENUE # 304  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: COHEN, PENNY  
Address: 934 MICHIGAN AVENUE, #206  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: KNOX, ASHLEY  
Address: 934 MICHIGAN AVENUE, #201  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: MASSON, CHRISTINA  
Address: 934 MICHIGAN AVENUE, #202  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: RITTER, JANA  
Address: 934 MICHIGAN AVENUE, #309  
City-St-Zip: MIAMI BEACH, 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 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: R MAXWELL SHEINER

MGR

11/07/2008

Electronic Signature of Signing Officer or Director

Date