FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL-REPORT**



FLORIDA DEPARTMENT OF STATE

Bandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

1. Corporation Name N9/000000548 (4)										
VENICE ISLE ACTIVITIES CLUB, INC.]		
TEMOR INCE NOTITIVIED OCOD, 1110								I LECTURA FOLD UND REGION REGION AND PROPERTY OF THE PROPERTY	H acill bail l and	Afari lan iaa
									A PAID PATH DAR	
Principal Place of Business Mailing Address									. Ebitt ağığı ğibil	61441 (A11 144)
600 CORTINA BLVD. 600 CORTINA BLVD.								3. Date Incorporated or Qualified		
VENICE FL 34292				VENICE FL 34292				01/27/1997		
								4. FEI Number 65 - 0742 8		pplied For
2. Principal Place of Business 2a. Mailing Address								63-0/428		ot Applicable
21 - Throipair	HACE OF DUSI	1638	—	26				6. Certificate of Status Desired		Additional leguired
Suite, Apt. #, etc.				Suite, Apt. #, etc.				6. Election Campaign Financing	\$5.00	
22				27				Trust Fund Contribution	Added t	
City & State				City & State				7. Is this nonprofit corporation a homeowners association?		
23				28				☐ Yes ☐ No		
Žip	Country			Zip Country				8. This corporation owes or has paid the		itanglble □ No
24	25 29 30 9. Name and Address of Current Registered Agent							Personal Property Tax due June 30. 10. Name and Address of New Registere		7 140
At 1 same and transfer of contain traffertown Lifety						Name				
KORP, WILLIAM R ESQ.						Stroot	Addros	ss (P.O. Box Number is Not Acceptable)		
	AIMAT HTU				82	3(1001)	~UUU198	es (r.o. pox rediriper is red Acceptable)		
SUITE 199					83					
VENICE FL 34285						City			. 65 Z ip	Code
A D						L				
office or r	ions of Sections 617.05 jent, or both, in the Stat-	e of Florida	7.1506, Florida Statute a. Such change was a	es, the above	e-named y the corp	poratio	ration submits this statement for the purposi on's board of directors. I hereby accept the a	ppointment as	registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent: I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE										1
	or printed name of registered ap			: Registered Ag	ent signature	required	when reinstating) DAT			
12.	OFFICERS AND DIRECTOR						r	ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D Geith, Gladys D			DELETE 1.1 T			ļ		Change	☐ Addition
NAME STREET ADORESS	725 ROMA ROAD			· ·		1.2 NAME				{
CITY-ST-ZIP	VENICE FL 34292					1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				
TITLE	D					2.1 TITLE			Change	Addition
NAME	CROTEAU, JOAN 2				2.2 NAME	2.2 NAME			•	Ì
STREET ADDRESS	906 JOLANDA CIR				2.3 STREE	2.3 SYREET ADDRESS				1
City - St - ZIP	VENICE FL 34292				2. 4 CITY-ST-ZIP					
TITLE	D DELETE 3					_	1		Change	Addition
KAMÉ	· · · · · · · · · · · · · · · · · · ·				3.2 NAME					ľ
STREET ADDRESS		RVINA DRIVE N			3.3 STREET					!
CITY-ST-ZIP TITLE	D	FL 34292		DELETE	3.4. C(TY- 4.1 TIFLE	ST-ZIP	 -		Change	Addition
NAME	_	RONALD		NOTOGLAYAL			l			L. Abdition
STREET ADDRESS		MO DRIVE		•	4.2 NAME	ADDOCCC				1
CITY-ST-ZIP		FL 34292			4.4 CITY-S					
TITLE	D	v		DELETE	5.1 TITLE	.,			Change	Addition
NAME	-	VSKI, WALTER			5.2 NAME		1		-	
STREET ADDRESS		STO DRIVE			5.3 STREET	ADDRESS	Į			ŀ
CITY-ST-ZIP	VENICE	FL 34292			5.4 CITY - S	T-ZIP				
TITLE	D	_		DELETE	6.1 TITLE				Change	Addition
NAME		ORTH, RITA			6.2 NAME	- (1			ļ
STREET ADDRESS		NTO DRIVE			6.3 STREET	ADDRESS				
CITY-ST-ZIP	VENICE	FL 34292			6.4 CITY - 5	T-ZIP	<u> </u>			

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

SIGNATURE:

FILED

Feb 12 1998 8:00am

Secretary of State