

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000000548

1. Entity Name

VENICE ISLE ACTIVITIES CLUB, INC.

FILED
Apr 10, 2000 8:00 am
Secretary of State

04-10-2000 90083 005 ****61.25

Principal Place of Business

Mailing Address

600 CORTINA BLVD.
VENICE FL 34292

~~600 CORTINA BLVD.~~
~~VENICE FL 34292-3349~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

603 ROMA ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

VENICE, FL

4. FEI Number

65-0742842

Applied For

Not Applicable

Zip

Country

Zip

Country

34292

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KORP, WILLIAM R ESQ.
333 SOUTH TAMiami TRAIL
SUITE 199
VENICE FL 34285

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME D
STREET ADDRESS MACRI, HECTOR
CITY-ST-ZIP 609 CERVINA DR. N.
VENICE FL 34292

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS MEYER, MARY E
CITY-ST-ZIP 504 ROMA RD.
VENICE FL 34292

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME D
STREET ADDRESS STROBEL, MADELINE
CITY-ST-ZIP 787 CERVINA DRIVE N
VENICE FL 34292

TITLE ☐ Change ☒ Addition
NAME DIRECTOR
STREET ADDRESS CASSIDY, MARGARET
CITY-ST-ZIP 496 CERVINA DR. N.
VENICE, FL. 34292

TITLE ☒ Delete
NAME D
STREET ADDRESS BARRY, BETTY
CITY-ST-ZIP 526 ROMA RD.
VENICE FL 34292

TITLE ☐ Change ☒ Addition
NAME DIRECTOR
STREET ADDRESS STANHOPE, NANCY
CITY-ST-ZIP 502 CERVINA DR. N.
VENICE, FL. 34292

TITLE ☐ Delete
NAME D
STREET ADDRESS SALISBURY, MARGE
CITY-ST-ZIP 412 CERVINA DR. S.
VENICE FL 34292

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS KLINTWORTH, RITA
CITY-ST-ZIP 412 TRENTO DRIVE
VENICE FL 34292

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: MARGE MEYER 4/5/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)