

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003772

FILED
Jan 17, 2009
Secretary of State

Entity Name: VENICE NEWCOMERS CLUB, INC.

Current Principal Place of Business:

4280 TIMBERLINE BLVD
VENICE, FL 34293

New Principal Place of Business:

101 MEDICI CT.
N. VENICE, FL 34275

Current Mailing Address:

P.O. BOX 315
VENICE, FL 34285

New Mailing Address:

P.O. BOX 315
VENICE, FL 34284

FEI Number: 65-0855850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DECOOK, ROBERT W
4280 TIMBERLINE BLVD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

SMITH, HUDSON C
101 MEDICI CT.
N. VENICE, FL 34275 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: HUDSON C. SMITH

01/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KALGREN, DENNIS
Address: 369 TURTLEBACK CROSSING
City-St-Zip: VENICE, FL 34293

Title: 1VPD () Delete
Name: KKNOW, JILL
Address: 1019 KINGS COURT
City-St-Zip: VENICE, FL 34293

Title: 2VPD () Delete
Name: PICKERING, KATHLEEN
Address: 161 MONTELLUNA DR
City-St-Zip: NOKOMIS, FL 34275

Title: SD () Delete
Name: PRESSLY, BEN
Address: 624 LAKESCENE DR
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: DECOOK, ROBERT W
Address: 4280 TIMBERLINE BLVD
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRESSLY, CLARKE
Address: 624 LAKESCENE DR.
City-St-Zip: VENICE, FL 34293

Title: 1VP (X) Change () Addition
Name: HANNON, NANCY
Address: 1872 BATELLO DR.
City-St-Zip: VENICE, FL 34292

Title: 2VP (X) Change () Addition
Name: GRADY, ELIZABETH
Address: 1584 MASENO DR.
City-St-Zip: VENICE, FL 34292

Title: S (X) Change () Addition
Name: PRESSLY, BEV
Address: 624 LAKESCENE DR
City-St-Zip: VENICE, FL 34293

Title: T (X) Change () Addition
Name: SMITH, HUDSON C
Address: 101 MEDICI CT.
City-St-Zip: N. VENICE, FL 34275

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: HUDSON C. SMITH

T

01/17/2009

Electronic Signature of Signing Officer or Director

Date