2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003789

Entity Name: VENICE TOUCHDOWN CLUB, INC.

FILED Apr 29, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

POST OFFICE BOX 997 1 INDIAN AVE. VENICE, FL 34284 VENICE, FL 34285

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 997 VENICE, FL 34284

FEI Number: 65-0928559 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POINSETT, DEBRA

671 MAY APPLE WAY

VENICE, FL 342937278 US

BOONE, BOONE, BOONE, KODA & FROOK, PA
1001 AVENIDA DEL CIRCO
VENICE, FL 34285 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: JEFF BOONE 04/29/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 CEO
 (X) Change () Addition

 Name:
 LANE, SCOTT
 Name:
 SARDINAS, BRIAN

 Address:
 512 CASA BONETA CIR
 Address:
 1020 CAPRI ISLES BLVD # 47

 City-St-Zip:
 NOKOMIS, FL 34275
 VENICE,, FL 34292

Title: TRE () Delete Title: PD/T (X) Change () Addition Name: POINSETT, DEBRA J Name: MUSSONE, JOHN Address: 671 MAY APPLE WAY Address: 846 VAN GOGH RD.

City-St-Zip: VENICE, FL 34293 City-St-Zip: ENGLEWOOD, FL 34223

Title: SD () Delete Title: () Change () Addition

 Name:
 VERCHOT, CHRISTINE
 Name:

 Address:
 3307 MEADOW RUN CIRCLE
 Address:

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:

Title: () Delete Title: VP () Change (X) Addition
Name: LAY, MICHAEL

Address: Address: 1050 CARPI ISLES BLVD APT. Q102

City-St-Zip: City-St-Zip: VENICE, FL 34292

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: JOHN MUSSONE PRES 04/29/2007