	PLEASE READ	ALL INSTRUCTI	ONS BEFORE C		
		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		2008 FEB - 6 AM 8: 47	
DOCUMENT # P02000041166 1. Corporation Name Ven-Lake Management Inc					SECRETARY OF STATE TALLAHASSEE.FLORIDA
Wen-Lake Management, Ir 2. Principal Office Address - No P.O. Box # 2240 Griffin Road Suite. Apt. #, etc. City & State Lakeland, Florida		<ul> <li>3. Mailing Office Address</li> <li>2240 Griffin Road</li> <li>Suite, Apt. #, etc.</li> <li>City &amp; State</li> <li>Lakeland, Florida</li> </ul>		600117251366         02/06/0801014018         8         02/06/0801014018         8         8         9          9     <	
Zip	Country	Zíp	Country	6	40.75
33810	USA	33810	USA	CERTIFICATE	OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Street Address (P.O. Box Number is Not Acceptable) 2240 Griffin Road Suite, Apt. #, Etc. City Lakeland, B. I, being appointed the registered agent of the above named corporation, am familiar with and accept the o Signature of Registered Agent ReGISTERED AGENT MUST SIGN				the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived. biligations of section 607.0505 or 617.0503, F.S. Date $2 - 1 - 28$	
9. Names and Street	Addresses of Each Officer an	d/or Director (Florida nonpre	ofit corporations must list at le	east 3 directors)	······
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip
P, D George W. Banning		2506	2506 Clubhouse Drive		Plant City, Florida 33566
S, T, D Cassa	ndra Banning	2506	2506 Clubhouse Drive		Plant City, Florida 33566
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this reinstatement owed by the corpo	application, the reason for dis ration have been paid and the is true and accurate, and my	solution has been eliminate names of individuals listed signature shall have the san	d, the corporate name satisfie on this form do not qualify for he legat effect as if made und	es the requirements	apter 607 or 617, F.S. I further certify that when filing s of section 607.0401 or 617.0401, F.S., that all fees trained in Chapter 119, F.S. The information indicated 
	SIGNATURE AND TYPED OR PI	RINTED NAME OF SIGNING OF			Date Daytime Phone #
		V			2/70