

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000089859

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** TAX CENTERS OF AMERICA VENICE INC

**Current Principal Place of Business:**

1660 HUDSON PT DR  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3402  
SARASOTA, FL 34230 US

**New Mailing Address:**

**FEI Number:** 26-3476771

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

L J ENTERPRISES OF WEST FLORIDA  
1660 HUDSON PT DR  
SARASOTA, FL 34236 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BUTLER, JOHN E  
**Address:** PO BOX 3402  
**City-St-Zip:** SARASOTA, FL 34230 US

**Title:** VP S  
**Name:** BUTLER, L J  
**Address:** PO BOX 3402  
**City-St-Zip:** SARASOTA, FL 34236

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** JOHN BUTLER

P

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date