

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000057449

Entity Name: NECESSARY VENTURES, INC.

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

464 GOLDEN GATE POINT APT  
#601  
SARASOTA, FL 34236

## **New Principal Place of Business:**

800 S. OSPREY AVE.  
ATTN. NORM SHEA  
SARASOTA, FL 34236

## **Current Mailing Address:**

464 GOLDEN GATE POINT APT  
#601  
SARASOTA, FL 34236

## **New Mailing Address:**

15 PARADISE PLAZA  
#371  
SARASOTA, FL 34239

FEI Number: 65-0846197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHEA, NORM  
% SUPLEE SHEA PA  
800 S OSPREY AVE  
SARASOTA, FL 342367834 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: D  
Name: LONSDALE, ROBERT D  
Address: 464 GOLDEN GATE POINT APT 601  
City-St-Zip: SARASOTA, FL 34236

Title: D  
Name: LONSDALE, KRISTY K  
Address: 464 GOLDEN GATE POINT APT 601  
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: ROBERT D. LONSDALE

MGR

03/21/2011

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

\_\_\_\_\_  
Date