

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706209

Entity Name: VENICE GARDENS CIVIC ASSOCIATION, INC.**Current Principal Place of Business:**406 SHAMROCK BLVD
VENICE, FL 34293**Current Mailing Address:**406 SHAMROCK BLVD
VENICE, FL 34293 US**FEI Number:** 59-1087285**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANGLE, KAREN ANN
421 SHAMROCK BLVD
VENICE, FL 34293 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:** KAREN ANN ANGLE

02/14/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FELKER, GARY
Address 344 HILLVIEW RD
City-State-Zip: VENICE FL 34293

Title VP, 2ND
Name EVANS, RON
Address 416 SHAMROCK BLVD
City-State-Zip: VENICE FL 34293

Title TREASURER
Name ANGLE, KAREN ANN
Address 421 SHAMROCK BLVD
City-State-Zip: VENICE FL 34293

Title SECRETARY
Name ANGLE, KAREN ANN
Address 421 SHAMROCK BLVD
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name MCNAMEE, PETER
Address 413 CLOVER RD
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name CASE, DENNIS
Address 1481 LAKESIDE DR.
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name ANGLE, JERRY
Address 421 SHAMROCK BLVD
City-State-Zip: VENICE FL 34293

Title VP, 1ST
Name PYLE, BOB
Address 413 SHAMROCK BLVD
City-State-Zip: VENICE FL 34293

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

SIGNATURE: KAREN ANN ANGLE**SECRETARY/TREASURER** 02/14/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DICKENS, SHIRLEY
Address 1741 CARIBBEAN CIRCLE
City-State-Zip: VENICE FL 34293

Title PAST PRESIDENT
Name BUTLER, JACK
Address 609 LA GORCE DR.
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name WEEKES, LYNN
Address 507 SANDLEWOOD DR.
City-State-Zip: VENICE FL 34293