### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 706209** 

Entity Name: VENICE GARDENS CIVIC ASSOCIATION, INC.

FILED
Jan 03, 2018
Secretary of State
CC1269478389

## **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:

TREASURE 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 A ANGLE 01/03/2018

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title PRESIDENT Title VP, 1ST

 Name
 BUTLER, JOHN
 Name
 JARDINE, BRUCE

 Address
 609 LA GORCE DR
 Address
 1460 LAKESIDE DR

 City-State-Zip:
 VENICE FL 34293
 City-State-Zip:
 VENICE FL 34293

Title TREASURER Title SECRETARY

NameANGLE, KAREN ANNNameANGLE, KAREN ANNAddress421 SHAMROCK BLVDAddress421 SHAMROCK BLVDCity-State-Zip:VENICE FL 34293City-State-Zip: VENICE FL 34293

Title DIRECTOR Title DIRECTOR

NameSCHULZE, P. J.NameBUCHANAN, SHARONAddress548 SHERIDAN DRAddress417 SHAMROCK BLVDCity-State-Zip:VENICE FL 34293City-State-Zip: VENICE FL 34293

Title DIRECTOR Title DIRECTOR

NameANGLE, JERRYNameRICHARD, SIMMONSAddress421 SHAMROCK BLVDAddress1735 CARIBBEAN CIRCLE

City-State-Zip: VENICE FL 34293 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 ANGLE TREASURE 01/03/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameCOELHO, PATNameMOON, VANAddress256 MOSS LANEAddress620 OXFORD DRCity-State-Zip:VENICE FL 34293City-State-Zip:VENICE FL 34293

TitleVP, 2NDTitlePAST PRESIDENTNameFELKER, GARYNameTRENTOR, SCOTTAddress344 HILLVIEW RDAddress337 HILLVIEW RDCity-State-Zip:VENICE FL 34293City-State-Zip:VENICE FL 34293