

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722230

Entity Name: VALENCIA ON THE GULF, INC.**Current Principal Place of Business:**627 ALHAMBRA ROAD
OFFICE
VENICE, FL 34285**Current Mailing Address:**444 GULF OF MEXICO DRIVE
SUITE 201
LONGBOAT KEY, FL, FL 34285 US**FEI Number:** 59-1431540**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE LAW OFFICES OF LOBECK & HANSON, P.A.
2033 MAIN STREET, SUITE 403
SARASOTA, FL 34237 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name ROGERS, JAMES
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title VPD
Name NEWLAND, DIANE
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title SD
Name KENNEDY, SUSAN
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title TD
Name ERTEL, EDNA
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title D
Name UHL, FRED
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title D
Name HANDA, JAMES
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name DAVENPORT, LAVINA
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name CASTIGLIANO-SCOTT, BETTY
Address 627 ALHAMBRA ROAD
OFFICE
City-State-Zip: VENICE FL 34285

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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: JAMES ROGERS

PRESIDENT

02/24/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MASSOLIO, DONALD
Address	627 ALHAMBRA ROAD OFFICE
City-State-Zip:	VENICE FL 34285