

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000006600

**FILED  
Apr 30, 2015  
Secretary of State  
CC9937787548**

**Entity Name:** VENETIA GARDENS SOUTH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

381 N KROME AVENUE  
SUITE 205  
HOMESTEAD, FL 33030

**Current Mailing Address:**

381 N KROME AVENUE  
SUITE 205  
HOMESTEAD, FL 33030

**FEI Number: 20-1687038**

**Certificate of Status Desired: No**

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

SKRLD, INC  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLES, FL 33134 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 VP, TREASURER, DIRECTOR  
Name BUSTAMANTE, JORGE E  
Address 381 N KROME AVE 205  
City-State-Zip: HOMESTEAD FL 33030

Title PD  
Name STRAVERS, WILLIAM  
Address 381 N KROME AVE 205  
City-State-Zip: HOMESTEAD FL 33030

Title SD  
Name KITTLE, CHRISTINA  
Address 381 N KROME AVE 205  
City-State-Zip: HOMESTEAD FL 33030

Title D  
Name HORNE, ROBERT  
Address 381 N KROME AVE 205  
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR  
Name ILBERT, ENZO  
Address 381 N KROME AVE 205  
City-State-Zip: HOMESTEAD FL 33030

*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: WILLIAM STRAVERS**

**P**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date