

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

DOCUMENT# N98000001657

**Entity Name:** VENETIAN ISLES AT LAKE CORAL SPRINGS COMMUNITY ASSOCIATION, INC.

**FILED**  
**Feb 12, 2015**  
**Secretary of State**  
**CC2827009787**

**Current Principal Place of Business:**

1750 UNIVERSITY DRIVE  
#205  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

1750 UNIVERSITY DRIVE  
#205  
CORAL SPRINGS, FL 33071

**FEI Number: 65-0834556**

**Certificate of Status Desired: No**

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

SWIFT MANAGEMENT & SOLUTIONS  
1750 UNIVERSITY DRIVE #205  
CORAL SPRINGS, FL 33071 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 D  
Name WESTON, KYLE  
Address 727 NW 124 AVE  
City-State-Zip: CORAL SPRING FL 33071

Title VPS  
Name DANIEL, LINDA  
Address 865 NW 124TH AVENUE  
City-State-Zip: CORAL SPRINGS FL 33071

Title PD  
Name STIRK, ROBERT  
Address 12221 NW 7TH DRIVE  
City-State-Zip: CORAL SPRINGS FL 33071

Title TD  
Name DAVIS, BRUCE  
Address 12311 NW 7TH COURT  
City-State-Zip: CORAL SPRINGS FL 33071

Title D  
Name LAURIA, HERNAN  
Address 743 NW 124TH AVENUE  
City-State-Zip: CORAL SPRINGS FL 33071

*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: ROBERT STIRK**

**PRES**

**02/12/2015**

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

\_\_\_\_\_  
Date