

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000002265

Entity Name: VENSURE, INC.**Current Principal Place of Business:**1688 MERIDIAN AVENUE
6TH FLOOR
MIAMI BEACH, FL 33139**Current Mailing Address:**20 GATEHOUSE ROAD
AMHERST, MA 01002 US**FEI Number:** 52-2363150**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	P
Name	KILLOH, SCOTT
Address	5959 COLLINS AVE., UNIT 907
City-State-Zip:	MIAMI BEACH FL 33140

Title	T
Name	FLOOD, HARRY
Address	35 KESTREL LANE
City-State-Zip:	AMHERST MA 01002

Title	SECRETARY
Name	FLOOD, HARRY J.
Address	35 KESTREL LANE
City-State-Zip:	AMHERST MA 01002

Title	VP
Name	FLOOD, HARRY J.
Address	35 KESTREL LANE
City-State-Zip:	AMHERST MA 01002

Title	VP, DIRECTOR
Name	SOLI, DAVID A.
Address	2 DARROWS RDG.
City-State-Zip:	EAST LYME CT 06333

Title	VP
Name	CODY, PATRICK J.
Address	29 NORFOLK ROAD
City-State-Zip:	COHASSET MA 02025

Title	DIRECTOR
Name	FLOOD, HARRY J.
Address	35 KESTREL LANE
City-State-Zip:	AMHERST MA 01002

Title	DIRECTOR
Name	KILLOH, SCOTT W.
Address	5959 COLLINS AVENUE #907
City-State-Zip:	MIAMI BEACH FL 33140

Continues on page 2

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

SIGNATURE: HARRY J. FLOOD

TREASURER

03/06/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SOBILOFF, PETER
Address 23 ADAMS DRIVE
City-State-Zip: CRESSKILL NJ 07626

Title DIRECTOR
Name COTTER, CIAN
Address 238 E. 4TH STREET, PH
City-State-Zip: NEW YORK NY 10009