## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N22197**

L Entity Name

Principal Place of Business

DOCKSIDE AT VENTURA CONDOMINIUM ASSOCIATION, INC.



Mailing Address

2580 WOODGATE BLVD. 2580 WOODGATE BLVD. ORLANDO, FL 32822 ORLANDO, FL 32822



04-24-2006 90435 023 \*\*\*\*61.25

40000003



04122006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-3038018	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

## DO-NOT-WRITE-IN-THIS-SPACE-

6. Name and Address of Current Registered Agent

ENCORG PROPERTY MANAGEMENT 75 GATLIN AVE., STE A ORLANDO, FL 32806

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

<ol> <li>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. I am familiar with, and accept the obligations of registered agent.</li> </ol>						
SIGNATURE	Signature, typed or printed name of registered agent and title it	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2006					
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PRUSINOWSKI, ROBERTA 2572 WOODGATE BLVD, #102 ORLANDO, FL 32822					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GONZALEZ, ROSA 2560 WOODGATE BLVD, #107 ORLANDO, FL 32822	-				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROTHSTEIN, ERIC 761 PULASKI ROAD GREENLAWN, NY 11740			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD TORRES, ISABEL 3508 WOODGATE BLVD # ORLANDO, FL 32822			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BMD ROTHSTEIN, CAROL 761 PULASKI RD GREENLAWN, NY 11740					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby	certify that the information supplied with this fill to this report or suppliemental report is true a	ling does not qualify for the exe	mptions co	ntained in Chapter 11	9, Florida Statutes. I further certify that the information of as if made under path; that I am an officer or director.	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPES OR PRINTED HAME OF BICHING OFFICER OR GREETOR OFFICER OR GREETOR