## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000004413

**FILED** Mar 24, 2011 Secretary of State

Entity Name: DOCKSIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

1850 N DIXIE HWY

FORT LAUDERDALE, FL 33305

**Current Mailing Address: New Mailing Address:** 

C/O ALL FLORIDA MANAGEMENT SERVICES 1971 W. MCNAB ROAD, SUITE #2 POMPANO BEACH, FL 33069

FEI Number: 65-1126445 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GOULD, JOEL L STEVENS & GOLDWYN, P.A. 1971 W. MCNAB ROAD 2 SOUTH UNIVERSITY DRIVE SUITE #2 SUITE #315 POMPANO BEACH, FL 33069 US PLANTATION, FL 33324 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: JOHN STEVENS 03/24/2011

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

GREER, GARRY R Name: Address: 1842 N DIXIE HWY.

City-St-Zip: FORT LAUDERDALE, FL 33305

Title:

Name: SCHOFFIELD, BRIAN Address: 1846 N DIXIE HWY.

City-St-Zip: FORT LAUDERDALE, FL 33305

Title: STD

ALLEN, THADDEUS R Name: Address: 1848 N DIXIE HWY

City-St-Zip: FORT LAUDERDALE, FL 33305

Title: VPD

Name: BUGG, PENELOPE Address: 1838 N DIXIE HWY

City-St-Zip: FORT LAUDERDALE, FL 33305

Title:

LACEY, MICHAEL Name: 3991 KUMQUAT AVENUE Address: City-St-Zip: COCONUT GROVE, FL 33133

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: THADDEUS ALLEN STD 03/24/2011