2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # N01000004413

1. Entity Name

Principal Place of Business

DOCKSIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:



FILED
Apr 28, 2003 8:00 am §
Secretary of State

04-28-2003 90129 025 ****61.25

C/O SAAVEDRA. PELOSI & GOODWIN 312 SOUTHEAST 17TH ST., SECOND FLOOR FORT LAUDERDALE FL 33316 2. Principal Place of Business		C/O SAAVEDRA. PELOSI & GOODWIN 312 SOUTHEAST 17TH ST SECOND FLOOR FORT LAUDERDALE FL 33316 3. Mailing Address					1121 88 212 16 221	an i) e poi) a:20 17.	1 003 2013 10 3 2		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State			City & State				00 1 1E0 TTO			oplied For	7
Zip	Zip Country		Zip	Country		5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name	and Address of Current R	egistered Agent			7. Name and A	Address of New	Registered			1
		المسابقة بالمداعا من من		Name				*			1
GOODWIN, ALLYSON D				Street A	Address (F	P.O. Box Number is Not Acceptable)					1
312 SOUTHEAST 17TH STREET					, , ,]
2ND FLO		TI 00040									
FURI LA	uderdale _	PL 33316		City				F	Zip Cod	e	
			he purpose of changing its r	egistered office o	or registere	ed agent, or both	, in the State of f	Florida. I an	n familiar with,	and accept	1
the obligat	ions of regist	ered agent.									
CICNATUDE											}
SIGNATURE .	Signature, typed	or printed name of registered agent an	d title if applicable. (NOTE:	Registered Agent signa	ture required	when reinstating)		DATE			
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k 1	FILE NOW	: FEEUS \$61.25	9. Election Cam	paign Financing		\$5.00 May Be		lake Che	ck Payable	to	
	1011	. 1,000 001.20	Trust Fund Co	ontribution.		Added to Fees	Flor	rida Depa	rtment of	State	
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	JOLLEY, J				D _BLA	NTON, L	ane	•	X Change	Addition	17 (10/02)
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TITLE NAME STREET ADORESS	JOLLEY, J 2400 EAS FT. LAUDI D	. Robert T LAS OLAS BLVD. ERDALE FL 33301		TITLE NAME STREET ADDRESS	D BLA 312	NTON, L	ane 7th Str	eet,	X Change 2nd Flo	Addition	CR2E037 (10/02)
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

SIGNATURE REQLANGED anton C