| 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: RUBENS TAVEIRA

PD

04/23/2016 Date

# 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N01000004413

# Entity Name: DOCKSIDE VILLAGE HOMEOWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

1850 N DIXIE HWY. FORT LAUDERDALE, FL 33305

# **Current Mailing Address:**

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

# FEI Number: 65-1126445

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

STEVENS & GOLDWYN, P.A. 2 SOUTH UNIVERSITY DRIVE SUITE #329 PLANTATION, FL 33324 US

SIGNATURE: Electronic Signature of Registered Agent

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.

| Officer/Director Detail : |  |  |
|---------------------------|--|--|
|---------------------------|--|--|

| Title           | VPD                      | Title           | PD                       |
|-----------------|--------------------------|-----------------|--------------------------|
| Name            | GREENBERG, STEPHEN R     | Name            | TAVEIRA, RUBENS          |
| Address         | 1858 N DIXIE HWY.        | Address         | 1846 N DIXIE HWY.        |
| City-State-Zip: | FORT LAUDERDALE FL 33305 | City-State-Zip: | FORT LAUDERDALE FL 33305 |
| Title           | SD                       | Title           | TD                       |
| Name            | GARCIA, ARIANNA          | Name            | HAUGEN, TOMMY            |
| Address         | 1852 N DIXIE HWY         | Address         | 1860 N DIXIE HWY         |
| City-State-Zip: | FORT LAUDERDALE FL 33305 | City-State-Zip: | FORT LAUDERDALE FL 33305 |
| Title           | DIRECTOR                 |                 |                          |
| Name            | GREER, GARRY             |                 |                          |
| Address         | 250 FIRST AVENUE<br>#603 |                 |                          |
| City-State-Zip: | CHARLESTOWN MA 02129     |                 |                          |

Certificate of Status Desired: No

Date

FILED Apr 23, 2016 Secretary of State CC4212175094

Electronic Signature of Signing Officer/Director Detail