

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002748

**Entity Name:** DORCHESTER G CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GRACE NANKERVIS  
162 DORCHESTER G  
WEST PALM BEACH, FL 33417

**Current Mailing Address:**

C/O GRACE NANKERVIS  
156 DORCHESTER G  
WEST PALM BEACH, FL 33417 US

**FEI Number:** 59-1637962

**Certificate of Status Desired:** No

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

NANKERVIS, GRACE  
162 DORCHESTER G  
WEST PALM BEACH, FL 33417 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 DIRECTOR  
Name ISAACS, ELLEN  
Address 160 DORCHESTER G  
City-State-Zip: WEST PALM BEACH FL 33417

Title S  
Name LAROSA, JUDITH  
Address 143 DORCHESTER G  
City-State-Zip: WEST PALM BEACH FL 33417

Title PRESIDENT  
Name NANKERVIS, GRACE  
Address 162 DORCHESTER G  
City-State-Zip: WEST PALM BEACH FL 33417

Title VP  
Name WEINER, ROY  
Address 148 DORCHESTER G  
City-State-Zip: WEST PALM BEACH FL 33417

Title D  
Name MIGLIORE, SANDRA  
Address DORCHESTER G  
City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER  
Name MILLER, HARVEY  
Address 164 DORCHESTER G  
City-State-Zip: WEST PALM BEACH FL 33417

*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:** GRACE NANKERVIS

**PRESIDENT**

**04/10/2013**

Electronic Signature of Signing Officer/Director Detail

Date