
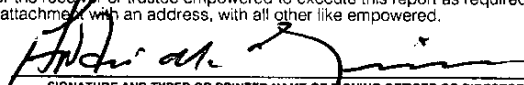


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2005 8:00 am**  
**Secretary of State**

04-26-2005 90217 001 \*\*\*762.50

<b>DOCUMENT # 715126</b> 1. Entity Name <b>DOVER HALL CONDOMINIUM CORP., INC.</b>					
Principal Place of Business <b>LAUDERHILL TEN MGMT CORP</b> <b>4331 WN 16THST</b> <b>LAUDERHILL, FL 33313 US</b>				Mailing Address <b>4301 NW 16TH ST</b> <b>LAUDERHILL, FL 33313 US</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
				Country	
4. FEI Number <b>59-1320385</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>LEMIRE, REINE G</b> <b>4301 N.W. 16TH ST.</b> <b>LAUDERHILL, FL 33313</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
8. 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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> <div style="text-align: right;"><small>DATE</small></div>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
		<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MILLAIRE, DENIS 4331 NW 16TH ST D-309 LAUDERHILL, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHAGNON, ROGER 4331 NW 16TH ST D-302 LAUDERHILL, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AM LENIEUX, CLAUDETTE 4331 NW 16TH ST D-204 LAUDERHILL, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEMMIEUX CLAUDETTE 4331 M.W. 16th ST. D 204 LAUDERHILL FL 33313 <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BONHAMME, MAURICE 4331 NW 16TH ST D-105 LAUDERHILL, FL 33313	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	THE RIAULT G. 4331 M.W. 16th ST. D205 LAUDERHILL FL 33313. <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCKINNON, ANDRE 4331 NW 16TH STREET D-111 LAUDERHILL, FL 33313	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same. <div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>
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 changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>  <div style="float: right; text-align: right;"> <b>March 28/05</b>  <small>Date</small> </div>					
<div style="display: flex; justify-content: space-between;"> <span><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small></span> <span><small>Daytime Phone #</small></span> </div>					

66012950



03152005 Chg-NP CR2E037 (10/03)

ATTACHMENT

66012950

# 715126



**DOVER HALL CONDOMINIUM CORP.**

4331 N.W. 16<sup>TH</sup> STREET, LAUDERHILL, FL 33313  
TEL: 954-733-1922 . FAX: 954-733-2060

**BOARD OF DIRECTORS**  
**BUREAU DE DIRECTION**

**2004 - 2006**

D-111	PRESIDENT/ PRÉSIDENT	MCKINNON, André	954-717-9580
D-309	V-PRESIDENT/ V-PRÉSIDENT	MILLIAIRE, Denis	954-486-3154
D-302	TREASURER/ TRÉSORIER	CHAGNON, Roger	954-735-5088
D-204	SECRETARY/ SECRÉTAIRE	LEMIEUX, Claudette	954-717-8682
D-105	DIRECTOR/ DIRECTEUR	BONHOMME, Maurice	954-735-2857