

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 22, 2008 8:00 am**  
**Secretary of State**

02-22-2008 90013 023 \*\*\*\*61.25

**DOCUMENT # 742443**

1. Entity Name

**DORCHESTER C CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

**56 DORCHESTER C  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417  
US**

Mailing Address

**56 DORCHESTER C  
CENTURY VILLAGE  
WEST PALM BEACH FL 33417  
US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

**59-1641333**

Applied For

No: Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILNER, ROSALYN J  
63 DORCHESTER C  
WEST PALM BEACH FL 33417**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VPD  
MAZZOCHI, JANINA  
61 DORCHESTER C  
WEST PALM BEACH FL**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**TD  
WILNER, ROSALYN J  
63 DORCHESTER C  
W PALM BCH, FL 00000**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SD  
CONNORS, LUCINDA  
52 DORCHESTER C  
WEST PALM BEACH FL 33417**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SD  
RICHARD NAVIGATE  
54 DORCHESTER C  
WEST PALM BEACH, FL 33417**

☒ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
INGOGLIA, ANTHONY  
53 DORCHESTER C  
WEST PALM BEACH FL 33417**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PD  
D'IMPERIO, ANGELO  
56 DORCHESTER C  
W PALM BCH FL**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D  
SAL PIAZZOLLA  
45 DORCHESTER C  
WEST PALM BEACH, FL 33417**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

**SIGNATURE:** *Rosalyn J. Wilner* **ROSALYN J. WILNER**

*2/6/08*

*561-478-2513*