

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

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90074 006 ****61.25

DOCUMENT # 752386

1. Entity Name

ROCKDOVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**1359 ROCK DOVE COURT
PUNTA GORDA FL 33950**

Mailing Address

**1359 ROCK DOVE COURT
PUNTA GORDA FL 33950**

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 **59-2099095**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**FOSTER, ROBERT B
1358 ROCK DOVE CT.
NO. 6
PUNTA GORDA FL 33950**

7. Name and Address of New Registered Agent

Name

Joan F. Greene

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

265 TAMIAHI TR

City

PUNTA GORDA

FL

Zip Code

33952

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

Joan F. Greene

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/5/03

FILE NOW: FEE IS \$61.25

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

TITLE	DP	<input type="checkbox"/> Delete
NAME	MC COLL, JOHN A	
STREET ADDRESS	1355 ROCK DOVE CT. #6	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	KRAEMER, LEONHARD	
STREET ADDRESS	1359 ROCK DOVE CT. #3	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	DT	<input checked="" type="checkbox"/> Delete
NAME	FOSTER, ROBERT	
STREET ADDRESS	1359 ROCK DOVE COURT, #6	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	DS	<input type="checkbox"/> Delete
NAME	BELOKUR, ROBERETA	
STREET ADDRESS	1358 ROCK DOVE CT. #5	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE	D	<input type="checkbox"/> Delete
NAME	PHILIPP, RONALD	
STREET ADDRESS	1355 ROCK DOVE CT. #4	
CITY-ST-ZIP	PUNTA GORDA FL 33950	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATRICIA Mc COLL	
STREET ADDRESS	1335 ROCK DOVE #6	
CITY-ST-ZIP	PUNTA GORDA FL 33952	
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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.

SIGNATURE:

SIGNATURE REQUIRED

Leonhard C. Kraemer

CR2E037 (10/02)