

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753528

**FILED**  
**Mar 15, 2010**  
**Secretary of State**

**Entity Name:** DOVER ESTATES HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

2020 BEL AIR AVE  
ORLANDO, FL 32812 US

**New Principal Place of Business:**

**Current Mailing Address:**

2012 BEL AIR AVE  
ORLANDO, FL 32812 US

**New Mailing Address:**

**FEI Number:** 13-0511020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARVER, CAROL  
2020 BELAIRE AVENUE  
ORLANDO, FL 32812 US

**Name and Address of New 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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BLACKWOOD, DAVID W MR  
Address: 5162 TELLSON PL  
City-St-Zip: ORLANDO, FL 32812

Title: TD  
Name: ENGSTROM, DEAN E MR  
Address: 2012 BEL AIR AVE  
City-St-Zip: ORLANDO, FL 32812

Title: SD  
Name: CARVER, CAROL MS  
Address: 2020 BEL AIR AVE  
City-St-Zip: ORLANDO, FL 32812

Title: VP  
Name: KING, BEVERLY MS  
Address: 4809 FAYANN ST  
City-St-Zip: ORLANDO, FL 32812

Title: D  
Name: BATTERSBY, SUE MS  
Address: 5209 FAYANN STREET  
City-St-Zip: ORLANDO, FL 32812

Title: D  
Name: SYVERTSON, RITA MS  
Address: 4816 OAKBROOKE PL  
City-St-Zip: ORLANDO, FL 32812

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: DEAN ENGSTROM

TD

03/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date