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Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **755322** (5)

1. Corporation Name

THE DOCK ON THE BAY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**3440 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228**

**3440 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228**

3. Date Incorporated or Qualified

12/01/1980

4. FEI Number

59-2115950

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SMITH, SUSAN
3440 GULF OF MEXICO DR
LONGBOAT KEY FL 33548**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **WOOD, COLLEEN**
STREET ADDRESS **3440 GULF OF MEXICO**
CITY-ST-ZIP **LONGBOAT KEY FL**

TITLE **T** ☐ DELETE
NAME **DICKERSON, DONALD M**
STREET ADDRESS **3440 GULF OF MEXICO DR**
CITY-ST-ZIP **LONGBOAT KEY, FL 00000**

TITLE **PO** ☐ DELETE
NAME **ROUSE, DOREEN**
STREET ADDRESS **3440 GULF OF MEXICO DR**
CITY-ST-ZIP **LONGBOAT KEY FL**

TITLE **D** ☐ DELETE
NAME **GROSS, HORACE**
STREET ADDRESS **3440 GULF OF MEX DR**
CITY-ST-ZIP **LONGBOAT KEY FL**

TITLE **D** ☐ DELETE
NAME **MCKENZIE, DON**
STREET ADDRESS **3440 GULF OF MEX DR**
CITY-ST-ZIP **LONGBOAT KEY FL**

TITLE **S** ☐ DELETE
NAME **SUSAN SMITH**
STREET ADDRESS **3440 GULF OF MEXICO DR.**
CITY-ST-ZIP **LONGBOAT KEY, FL. 34228**

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

Susan Smith

4-22-98

CP2E037 (10/97)