

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 755322

1. Entity Name

THE DOCK ON THE BAY ASSOCIATION, INC.

Principal Place of Business

3440 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228

Mailing Address

3440 GULF OF MEXICO DR.
LONGBOAT KEY FL 34228-2809

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

59-2115950

Applied For

Not 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

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOOD, COLLEEN 3440 GULF OF MEXICO LONGBOAT KEY FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DICKERSON, DONALD M 3440 GULF OF MEXICO DR LONGBOAT KEY, FL 00000	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROUSE, DOREEN 3440 GULF OF MEXICO DR LONGBOAT KEY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSS, HORACE 3440 GULF OF MEX DR LONGBOAT KEY FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKENZIE, DON 3440 GULF OF MEX DR LONGBOAT KEY FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, SUSAN 3440 GULF OF MEXICO DR LONGBOAT KEY FL 34228	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ED BYDALEK 3440 GULF OF MEXICO DR Long Boat Key, FL 34228	☒ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richard Olin 3440 GULF OF MEXICO Drive Long Boat Key, FL 34228	☒ Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEILA CHIPMAN 3440 GULF OF MEXICO DR Long Boat Key, FL 34228	☐ Change ☒ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90012 028 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)