


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90019 026 ****61.25

DOCUMENT # 757119 1. Entity Name DOGWOOD CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 235 NE 6TH AVE D DELRAY BEACH FL 33483 US			Mailing Address 235 NE 6TH AVE D DELRAY BEACH FL 33483 US		
2. Principal Place of Business		3. Mailing Address 817 GEORGE Bush Blvd. DELRAY BEACH FL 33483			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E037 (10/05)	
City & State		City & State FL 33483		4. FEI Number 59-2173416	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PUGH, DAVID 235 NE 6TH AVE D DELRAY BEACH FL 33483				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD GAY, LAPPEN 5340 LAS VERDES CIR, #314 DELRAY BEACH FL 33484	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KANIUKA, LEE 5340 LAS VERDES CR #103 DELRAY BEACH, FL 33484	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAVINE, EVELYN 5340 LAS VERDES CIR 203 DELRAY FL 33484	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	UPD MOCERI, VITO 5340 LAS VERDES CR #211 DELRAY BEACH, FL 33484	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOLDBERG, AL 5340 LAS VERDES CIRCEL, #219 DELRAY BEACH FL 33484	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TONISSON, LAURA 5340 LAS VERDES CR #213 DELRAY BEACH, FL 33484	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCHARFF, RHODA 5340 LAS VERDES CR #315 DELRAY BEACH FL 33484	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LAPPEN, GAY 5340 LAS VERDES CR #314 DELRAY BEACH FL 33484	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FRIED, EVELYN 5340 LAS VERDES CR #320 DELRAY BEACH FL 33484	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHAFFER, RUTH 5340 LAS VERDES CIR #204 DELRAY BEACH FL 33484	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: **X LAURA TONISSON TD** **X 03/04/06** **X 561-638-1554**