## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 759508** 

FILED Jan 08, 2009 Secretary of State

Entity Name: 46 DOCKSIDE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:			
1220 S.E. 4 UNIT 109	6TH STREET						
CAPE COF	RAL, FL 33904						
Current Mailing Address:			New Maili	New Mailing Address:			
UNIT 109	6TH STREET RAL, FL 33904						
FEI Number:	59-2650364	FEI Number Applied For ( )	FEI Number Not Appl	icable ( )	Certificate of Status Des	ired ( )	
Name and	Address of Cu	urrent Registered Agent:	Name and	Address of N	lew Registered Agen	t:	
1220 S.E. 4	RS, ARTHUR 16TH STREET, RAL, FL 33904		1220 S.E. 4 UNIT 112	DESROSIERS, ARTHUR M 1220 S.E. 46TH STREET UNIT 112 CAPE CORAL, FL 33904 US			
The above in the State		ubmits this statement for the pu	rpose of changing it	ts registered o	ffice or registered ager	nt, or both,	
SIGNATUR	RE: ARTHUR I	M. DESROSIERS			01/08/2009		
	Electroni	c Signature of Registered Ager	nt		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () I ROHAN, JAMES 1220 SE 46TH S CAPE CORAL, F		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	D () I GOTT, RONALD 1220 SE 46TH S CAPE CORAL, F		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	D () I GUESS, JOHN 1220 S.E. 46TH CAPE CORAL, F	•	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	D () I FLORENCE, FAR 1220 S.E. 46TH CAPE CORAL, F	STREET #105	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	P () I DESROSIERS, A 1220 SE 46TH S CAPE CORAL, F	T 112	Title: Name: Address: City-St-Zip:	P (X) DESROSIERS, 1220 SE 46TH CAPE CORAL,	ST 112		
Title: Name: Address: City-St-Zip:	TS () I GILLESPIE, EVE 1220 SE 46TH S CAPE CORAL, F	T 102	Title: Name: Address: City-St-Zip:	()	) Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARTHUR M. DESROSIERS P 01/08/2009