2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#765114

FILED Apr 24, 2008 Secretary of State

Entity Nai	me: DOTTOF	R CONDOMINIUM ASSOCIATIO	ON, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
129 S. GO #9	LFVIEW RD				
	RTH, FL 3346	60			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	SS AIR RD LE, GA 30506	}			
FEI Number:	: 59-2266541	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
	I, KAREL LFVIEW RD				
#9 LAKE WO	RTH, FL 3346	60 US			
	named entity of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (JOHNSON, KA 129 S. GOLFV LAKE WORTH	IEW RD #9	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	TD (JOHNSON, LIS 129 S. GOLFV LAKE WORTH	IEW RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (GOLLERETTE 129 S. GOLFV LAKE WORTH	TEW RD #8	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: KAREL JOHSON PD 04/24/2008