

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766525

FILED
Aug 17, 2009
Secretary of State

Entity Name: DOCKSIDE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8526 LYDIA LANE
#1
PANAMA CITY BEACH, FL 32408

New Principal Place of Business:

Current Mailing Address:

8526 LYDIA LANE
#1
PANAMA CITY BEACH, FL 32408

New Mailing Address:

FEI Number: 74-3089480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NISSEN, MATTHEW J
8526 LYDIA LANE
UNIT-1
PANAMA CITY BEACH, FL 32408 US

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRAY, LEROY
Address: 8526 LYDIA LN
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: TS () Delete
Name: NISSEN, MATTHEW J
Address: 8526 LYDIA LANE SUITE 1
City-St-Zip: PANAMA CITY, FL 32408

Title: EB () Delete
Name: STREMSKI, KEN
Address: 8526 LYDIA LANE #4
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: EB () Delete
Name: BROWN, WILLIAM
Address: 5737 TROY HIGHWAY
City-St-Zip: MONTGOMERY, AL 36116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MATTHEW NISSEN

SEC

08/17/2009

Electronic Signature of Signing Officer or Director

Date