

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769623

FILED  
Jan 11, 2012  
Secretary of State

**Entity Name:** DOCKSIDE NORTH OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6909 N.LAGOON DR.,#F5  
PANAMA CITY BEACH, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

6909 N.LAGOON DR.,#F5  
PANAMA CITY BEACH, FL 32408

**New Mailing Address:**

FEI Number: 59-2847251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GIBSON, CLARICE P SEC.-TR  
6909 N. LAGOON DR.,  
#F5  
PANAMA CITY BEACH, FL 32408 US

**Name and Address of New Registered Agent:**

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: DP  
Name: MCCRARY, GRADY  
Address: 6909 NORTH LAGOON DRIVE, UNIT #A-2  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: DVP  
Name: BRASWELL, FLO  
Address: 414 NORTH BOARD STREET  
City-St-Zip: BAINBRIDGE, GA 39817

Title: D  
Name: CHERRY, CINDY  
Address: 4210 EDDINS ROADS  
City-St-Zip: DOTHAN,, AL 36301

Title: DTAS  
Name: GIBSON, CLARICE  
Address: 4191 SOUTH STATE HIGHWAY 109  
City-St-Zip: DOTHAN, AL 36301

Title: D  
Name: SIBLEY, JIM  
Address: 6909 NORTH LAGOON DRIVE, UNIT #F-2  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: D  
Name: NABORS, W.L.  
Address: 3906 LAURENS LANE  
City-St-Zip: SNELLVILLE, GA 30039

I hereby 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 all other like empowered.

SIGNATURE: CLARICE GIBSON

DTAS

01/11/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date