

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 22, 2011
Secretary of State**

DOCUMENT# 771279

Entity Name: DOLLY BAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, STE 7Q
NEW PORT RICHEY, FL 34652 US**New Principal Place of Business:**C/O PROGRESSIVE MANAGEMENT, INC.
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US**Current Mailing Address:**C/O QUALIFIED PROPERTY MGMT INC
5901 US HWY 19, STE 7Q
NEW PORT RICHEY, FL 34652 US**New Mailing Address:**C/O PROGRESSIVE MANAGEMENT, INC.
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US**FEI Number:** 59-2383494**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**QUALIFIED PROPERTY MGMT
5901 US HWY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652 US**Name and Address of New Registered Agent:**PROGRESSIVE MANAGEMENT, INC.
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: MAUREEN REARDON CPM

07/22/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BOJKO, MIKE
Address: 2577 DOLLY BAY DRIVE 104
City-St-Zip: PALM HARBOR, FL 34684

Title: VP/S
Name: KOBIS, LEONA
Address: 2533 DOLLY BAY DRIVE 207
City-St-Zip: PALM HARBOR, FL 34684

Title: TD
Name: BAUTEL, DALE
Address: 2599 DOLLY BAY DRIVE 208
City-St-Zip: PALM HARBOR, FL 34684

Title: D
Name: REMALEY, ROBERT
Address: 2577 DOLLY BAY DRIVE 105
City-St-Zip: PALM HARBOR, FL 34684

Title: D
Name: MACLEOD, GLENN
Address: 461 OAK BROOK TERRACE
City-St-Zip: PALM HARBOR, FL 34684

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: MICHAEL BOJKO

PRES

07/22/2011

Electronic Signature of Signing Officer or Director

Date