


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005 8:00 am
Secretary of State

05-31-2005 90005 012 ***150.00

DOCUMENT # F93000000193 1. Entity Name DOVER INDUSTRIES, INC.																																																																																																																																									
Principal Place of Business 675 TOLLGATE ROAD, STE. N. ELGIN, IL 60123			Mailing Address 675 TOLLGATE ROAD, STE. N. ELGIN, IL 60123																																																																																																																																						
2. Principal Place of Business		3. Mailing Address																																																																																																																																							
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																							
City & State		City & State																																																																																																																																							
Zip	Country	Zip	Country																																																																																																																																						
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent																																																																																																																																					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYES ST STE 105 TALLAHASSEE, FL 32301				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																																					
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																							
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																									
SIGNATURE: <i>Karen Casten</i> KAREN CASTEN, Assistant <i>11/2/05</i> <i>847-468-0008</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																									

Attachment
40086339

2005 For Profit Corporation
Annual Report

Document #F93000000193
Dover Industries, Inc.

Officers and Directors - Attachment for additional officers and directors

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ralph S. Coppola 2180 Satellite Blvd, #350 Duluth, GA 30097	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ronald L. Hoffman 280 Park Ave 34th Fl New York, NY 10017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gerhard D. Meese 20 Hawley Street, 6th Floor Binghamton, NY 13901	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James L. Koley 1125 S. 103rd Street Omaha, NE 68124	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition