

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120833

FILED
Sep 16, 2009
Secretary of State

Entity Name: DOCKSIDE PROFESSIONAL SERVICES, LLC.

Current Principal Place of Business:

30 OCEAN FRONT DRIVE
KEY LARGO, FL 33037 US

New Principal Place of Business:

217 MATECUMBE AVE
ISLAMORADA, FL 33036 US

Current Mailing Address:

185 EAST MAIN STREET
SUITE #405
BENTON HARBOR, MI 49022 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHAPMAN, WILLIAM R
30 OCEAN FRONT DRIVE
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

DIXON, ROBERT J
217 MATECUMBE AVE
ISLAMORADA, FL 33036 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: ROBERT J DIXON

09/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WOLF, ANGELA
Address: 185 EAST MAIN STREET SUITE #405
City-St-Zip: BENTON HARBOR, MI 49022 US

Title: MGRM () Delete
Name: CHAPMAN, WILLIAM R
Address: 30 OCEAN FRONT DRIVE
City-St-Zip: KEY LARGO, FL 33037 US

Title: MGRM () Delete
Name: WOLF, WINN
Address: 2854 KEVIN STREET
City-St-Zip: SAINT JOSEPH, MI 49085 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: DIXON, ROBERT J
Address: 217 MATECUMBE AVE
City-St-Zip: ISLAMORADA, FL 33036 US

Title: MGRM (X) Change () Addition
Name: WOLF, WINN
Address: 2854 KEVIN ST.
City-St-Zip: SAINT JOSEPH, MI 49085 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANGELA WOLF

MGRM

09/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date