

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2006 8:00 am
Secretary of State

01-10-2006 90022 029 ***150.00

DOCUMENT # M93994

1. Entity Name
DOCKSIDE CANVAS, INC.



Principal Place of Business
**1105 S.E. 12TH AVE., UNIT E
CAPE CORAL, FL 33990 US**

Mailing Address
**1105 S.E. 12TH AVE., UNIT E
CAPE CORAL, FL 33990 US**



2. Principal Place of Business
413 SE. 21 AVE.
Suite, Apt. #, etc.

3. Mailing Address
413 SE. 21 AVE.
Suite, Apt. #, etc.

01032006 Chg-P CR2E034 (11/05)

City & State
CAPE CORAL, FL.
Zip
33990 Country
LKE

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CAPE CORAL, FL.
Zip
33990 Country
LKE

4. FEI Number
65-0065814 Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**GOZA, STEVEN E
1105 S.E. 12TH AVE., UNIT E
CAPE CORAL, FL 33990**

7. Name and Address of New Registered Agent

Name **STEVEN E. GOZA**

Street Address (P.O. Box Number is Not Acceptable)

413 SE. 21 AVE.

City **CAPE CORAL** FL Zip Code **33990**

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

Steven E. Goza

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-04-06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
GOZA, STEVEN E
1105 S.E. 12TH AVENUE., UNIT E
CAPE CORAL, FL 33990** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
STEVEN E. GOZA
413 SE. 21 AVE
CAPE CORAL, FL 33990** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Steven E. Goza
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-04-06 **239-246-8246**
Date Daytime Phone #