

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 21, 2007**  
**Secretary of State**

DOCUMENT# N03000004909

**Entity Name:** LOCKS LANDING COMMUNITY DOCKING FACILITY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1304 SW BAYSHORE BLVD  
PORT SAINT LUCIE, FL 34983**New Principal Place of Business:**8884 SW FISHERMAN'S WHARF DRIVE  
STUART, FL 34997**Current Mailing Address:**% BAYSHORE ASSOC. MGMT  
1304 SW BAYSHORE BLVD  
PORT SAINT LUCIE, FL 34983**New Mailing Address:**C/O J & J PERSONALIZED MANAGEMENT  
POST OFFICE BOX 1863  
PALM CITY, FL 34991**FEI Number:** 02-0695274**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SIEBERT, STEVEN H  
8884 SW FISHERMANS WHARF DR  
STUART, FL 34997 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: P ( ) Delete  
Name: SIEBERT, STEVE  
Address: 8884 SW FISHERMANS WHARF DR  
City-St-Zip: STUART, FL 34997Title: VP ( ) Delete  
Name: HAMMOND, MARK  
Address: 8887 SW FISHERMANS WHARF DR  
City-St-Zip: STUART, FL 34997Title: D ( ) Delete  
Name: EUGENE, REIFF  
Address: 8824 SW FISHERMANS WHARF DR  
City-St-Zip: STUART, FL 34997Title: D ( ) Delete  
Name: PETERS, BRAD  
Address: 8082 SW YACHTSMANS DR  
City-St-Zip: STUART, FL 34997Title: ST ( ) Delete  
Name: LOCATIS, TERRY  
Address: 8808 SW FISHERMANS WHARF DR  
City-St-Zip: STUART, FL 34997**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: JERRY ZALBEN

MGR

11/21/2007

Electronic Signature of Signing Officer or Director

Date