

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000007625

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** DOVER SHORES-EAST NEIGHBORHOOD ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

4700 FONTANA STREET  
ORLANDO, FL 32807

**New Principal Place of Business:**

**Current Mailing Address:**

4700 FONTANA STREET  
ORLANDO, FL 32807

**New Mailing Address:**

**FEI Number:** 59-2986677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JARMAN, KEN  
4406 WAYFARER PLACE  
ORLANDO, FL 32807 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:** VP  
**Name:** JARMAN, KEN  
**Address:** 4406 WAYFARER PLACE  
**City-St-Zip:** ORLANDO, FL 32807

**Title:** MEM  
**Name:** SELCH, ROGER  
**Address:** 781 MARSCASTLE AVE  
**City-St-Zip:** ORLANDO, FL 328071206

**Title:** TRES  
**Name:** SPROUSE, SHARON  
**Address:** 4707 ELAINE PLACE  
**City-St-Zip:** ORLANDO, FL 32812

**Title:** SEC  
**Name:** FEGEBANK, MARY  
**Address:** 4613 WAYFARER  
**City-St-Zip:** ORLANDO, FL 32807

**Title:** PRES  
**Name:** HOULE, FABIEN  
**Address:** 4700 FONTANA STREET  
**City-St-Zip:** ORLANDO, FL 32807

**Title:** MEM  
**Name:** HOLTON, TINA  
**Address:** 4619 FONTANA STREET  
**City-St-Zip:** ORLANDO, FL 32807

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:** SHARON SPROUSE

TRES

01/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date