

DOCUMENT # N04000001482

1. Entity Name

DOVE KEY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

12131 NW 46TH CT
CORAL SPRINGS FL 33076

Mailing Address

12131 NW 46TH CT
CORAL SPRINGS FL 33076

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

ROBERT A. WHITE, P.A.
1401 UNIVERSITY DR
SUITE 600
CORAL SPRINGS FL 33071- SPR

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
LAI, SING M
12131 NW 46TH CT
CORAL SPRINGS FL 33076

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
ZHANG, HUI H
12131 NW 46TH CT
CORAL SPRINGS FL 33076

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

U00000551097
05/13/06-80085-013 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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:

Sing M Lai
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Zhang Hui Hong

05/24/06

822-345-9888