

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000008223

1. Entity Name
MANSARD DOCK ASSOCIATION, INC.



Principal Place of Business
**9501 E BAY HARBOR DRIVE
BAY HARBOR ISLANDS, FL 33154**

Mailing Address
**9501 E BAY HARBOR DRIVE
BAY HARBOR ISLANDS, FL 33154**

DO NOT WRITE IN THIS SPACE



01102006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3796651

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RUTHENBERG, MARVIN
9501 E BAY HARBOR DRIVE
BAY HARBOR ISLANDS, FL 33154**

**DO NOT WRITE
IN THIS SPACE**

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 remitting)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|-----------------|------------------------------|
| TITLE | DP |
| NAME | RUTHENBERG, MARVIN |
| STREET ADDRESS | 9501 E BAY HARBOR DRIVE |
| CITY - ST - ZIP | BAY HARBOR ISLANDS, FL 33154 |
| TITLE | DT |
| NAME | MINTER, JOHN |
| STREET ADDRESS | 9501 E BAY HARBOR DRIVE |
| CITY - ST - ZIP | BAY HARBOR ISLANDS, FL 33154 |
| TITLE | DS |
| NAME | BERNARD, JEAN |
| STREET ADDRESS | 9501 E BAY HARBOR DRIVE |
| CITY - ST - ZIP | BAY HARBOR ISLANDS, FL 33154 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY - ST - ZIP | |

000000409874
02/09/06-80014-008 61.25

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IN THIS SPACE**

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 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:

John K. Minter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/06
Date

305-888-4137
Daytime Phone #