

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 24, 2009**  
**Secretary of State**

DOCUMENT# N06000010874

**Entity Name:** DOCKSIDE LOFTS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**11380 PROSPERITY FARMS RD, 221E  
PALM BEACH GARDENS, FL 33410**New Principal Place of Business:****Current Mailing Address:**11380 PROSPERITY FARMS RD, 221E  
PALM BEACH GARDENS, FL 33410**New Mailing Address:****FEI Number:** 20-5747758**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**EDELMAN, KENNETH  
2600 GLADES CIRCLE, NO. 100  
WESTON, FL 33327 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: DP ( ) Delete  
Name: EDELMAN, KENNETH  
Address: 2600 GLADES CIRCLE, NO. 100  
City-St-Zip: WESTON, FL 33327

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: EDELMAN, KENNETH  
Address: 2600 GLADES CIRCLE, NO. 100  
City-St-Zip: WESTON, FL 33326

Title: DVP ( ) Change (X) Addition  
Name: EDELMAN, DEBRA M  
Address: 2600  
City-St-Zip: GLADES CIRCLE ,NO100, FL 33326

Title: DSP ( ) Change (X) Addition  
Name: EDELMAN, MICHAEL  
Address: 2600 GLADES CIRCLE , NO 100  
City-St-Zip: WESTON, FL 33326

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: KENNETH EDELMAN

PRES

07/24/2009

Electronic Signature of Signing Officer or Director

Date