

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 12, 2008**  
**Secretary of State**

DOCUMENT# N07000009728

**Entity Name:** DOCKSIDE CONDOMINIUM ASSOCIATION CLEARWATER BEACH, INC.**Current Principal Place of Business:**445 HAMDEN DRIVE  
CLEARWATER BEACH, FL 33767**New Principal Place of Business:****Current Mailing Address:**P O BOX 120941  
CLERMONT, FL 34712**New Mailing Address:****FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ALEMAN, ADRIANA M  
2704 REW CIRCLE SUITE 102  
OCOOE, FL 34761 US**Name and Address of New Registered Agent:**FREDERICK, LARRY  
445 HAMDEN DRIVE  
CLEARWATER BEACH, FL 33767 US

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: LARRY FREDERICK

12/12/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: BENEVIDES, PEDRO  
Address: 14238 CORKWOOD LN  
City-St-Zip: ASTATULA, FL 34705Title: VD (X) Delete  
Name: JONES, BUTCH  
Address: 634 EDGEWATER DR  
City-St-Zip: DUNEDIN, FL 34698Title: STD (X) Delete  
Name: BRANNON, DAVID  
Address: 12130 SKYVIEW LANE  
City-St-Zip: CLERMONT, FL 34715**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: FREDERICK, LARRY  
Address: 445 HAMDEN DRIVE  
City-St-Zip: CLEARWATER BEACH, FL 34767Title: ( ) 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: LARRY FREDERICK

P

12/12/2008

Electronic Signature of Signing Officer or Director

Date