FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 11 1996 8:00 am
Secretary of State

DOCUMENT # N23213 (4)

1. Corporation Name
DOVER LANDING HOMEOWNERS ASSOCIATION OF PENSACOLA, INC.

Principal Place of Business
PO BOX 30282
PENSACOLA FL 32503

Mailing Address
PO BOX 30282
PENSACOLA FL 32503

3. Date Incorporated or Qualified: 10/28/1987
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-2971722 — Applied For ☐ Not Applicable ☐

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent
MITCHELL, DUNCAN
4272 BRIGHTON DRIVE
PENSACOLA FL 32504

10. Name and Address of New Registered Agent
81 Name: GUELPA, SUZANNE
82 Street Address (P.O. Box Number is Not Acceptable): 3313 BERKSHIRE CT.
83
84 City: PENSACOLA FL 85 Zip Code: 32504

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: X Suzanne B. Guelpa ~~JONATHAN D. GREEN TD~~ — 3/5/96 ~~1/31/96~~
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☑ DELETE	1.1 TITLE	PD	☑ Change ☐ Addition
NAME	MITCHELL, DUNCAN		1.2 NAME	GUELPA, SUZANNE	
STREET ADDRESS	4272 BRIGHTON DRIVE		1.3 STREET ADDRESS	3313 BERKSHIRE CT.	
CITY-ST-ZIP	PENSACOLA FL		1.4 CITY-ST-ZIP	PENSACOLA, FL 32504	
TITLE	VD	☑ DELETE	2.1 TITLE	VD	☑ Change ☐ Addition
NAME	GUELPA, SUZANNE		2.2 NAME	BUTCH HAYNES	
STREET ADDRESS	3313 BERKSHIRE COURT		2.3 STREET ADDRESS	4284 BRIGHTON DR	
CITY-ST-ZIP	PENSACOLA FL		2.4 CITY-ST-ZIP	PENSACOLA, FL 32504	
TITLE	TD	☑ DELETE	3.1 TITLE	TD	☐ Change ☑ Addition
NAME	CAMPBELL, PAT		3.2 NAME	JONATHAN GREEN	
STREET ADDRESS	3360 TOMPKINS ST		3.3 STREET ADDRESS	3320 TOMPKINS ST	
CITY-ST-ZIP	PENSACOLA FL 32504		3.4 CITY-ST-ZIP	PENSACOLA, FL 32504	
TITLE	SD	☑ DELETE	4.1 TITLE	SD JASON RIGGS	☐ Change ☑ Addition
NAME	BILBREY, PAM		4.2 NAME	3310 NEWHOPE RD.	
STREET ADDRESS	3327 BERSHIRE COURT		4.3 STREET ADDRESS	PENSACOLA FL 32504	
CITY-ST-ZIP	PENSACOLA FL		4.4 CITY-ST-ZIP		
TITLE	D	☑ DELETE	5.1 TITLE	D KNOWLES, RALPH	☐ Change ☑ Addition
NAME	HAYNES, BUTCH		5.2 NAME	3300 TOMPKINS ST	
STREET ADDRESS	4284 BRIGHTON DRIVE		5.3 STREET ADDRESS	PENSACOLA FL 32504	
CITY-ST-ZIP	PENSACOLA FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	$61.25	
STREET ADDRESS			6.3 STREET ADDRESS	Deposited by Bmk	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Suzanne B. Guelpa ~~JONATHAN D. GREEN TD~~ — 3/5/96 ~~1/31/96~~ — 904-434-5292 ~~904-469-9099~~
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CS 4/11/96

CR2E037 (12/95)