

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 05, 2003 8:00 am
Secretary of State

03-05-2003 90041 042 ****61.25

DOCUMENT # N23213

1. Entity 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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2971722**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**DISHER, JANE A
4151 BRIGHTON DRIVE
PENSACOLA FL 32504**

7. Name and Address of New Registered Agent

Name **Keri Litton**

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

4296 Brighton Drive

City

Pensacola

FL

Zip Code

32504

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

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	PD KOTLARZ, JACK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	4131 BRIGHTON DRIVE PENSACOLA FL 32504	
TITLE NAME	VD BEALL, FRANK	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	4248 BRIGHTON DRIVE PENSACOLA FL 32504	
TITLE NAME	TD DISHER, JANE A	<input checked="" type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	4151 BRIGHTON DRIVE PENSACOLA FL 32504	
TITLE NAME	SD WILLIAMS, MARRY	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	3820 TOMPKINS ST PENSACOLA FL 32504	
TITLE NAME	D CARLAN, WALTER	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	4150 BRIGHTON DR PENSACOLA FL 32504	
TITLE NAME	D STEWART, REVONDA	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	4281 BRIGHTON DR PENSACOLA FL 32504	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME	SD Laura Wiggins	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3361 Tompkins St Pensacola, FL 32504	
TITLE NAME	TD Keri Litton	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	4296 Brighton Pensacola, FL 32504	
TITLE NAME	PD Marry Williams	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	3820 Tompkins St Pensacola, FL 32504	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE **Keri D. Litton**

3/1/03

850-435-7400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)