

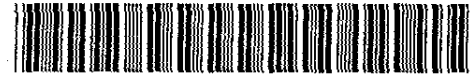
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # N93000005395		
1. Entity Name DOVER PARC CONDOMINIUM ASSOCIATION, INC.		

Principal Place of Business BAYVIEW PROPERTY MGMT. 4600 ENTERPRISE AVE. STE A NAPLES FL 34104	Mailing Address BAYVIEW PROPERTY MGMT. 4600 ENTERPRISE AVE. STE A NAPLES FL 34104
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number **65-0418991** Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent WRIGHT, RUSSELL 4600 ENTERPRISE AVE STE A NAPLES FL 34104

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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 STREET ADDRESS CITY - ST - ZIP	TD ALCOTT, JOHN 379 DOVER PLACE #601 NAPLES FL 34104 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BARON, MAX 367 DOVER PLACE #1006 NAPLES FL 34104 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BRASWELL, TAMERA 367 DOVER PLACE 1002 NAPLES FL 34104 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MALEBRANCHE, MARIE 378 DOVER PLACE 1003 NAPLES FL 34104 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD TIBALDI, ANNE MARIE 367 DOVER PLACE #1004 NAPLES FL 34104 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
U00000508491 04/28/06-80006-024 61.25	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

acting Secretary

4-3-06

434-6100

Date

Daytime Phone #