

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

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90050 020 ****61.25

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1. Entity Name

DOCKSIDE OF SUN N' LAKES OWNERS' ASSOCIATION, INC.



Principal Place of Business

**COUNTRY CLUB DRIVE
LAKE PLACID FL 33852**

Mailing Address

**PO BOX 598
LAKE PLACID FL 33862**

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

59-2715256

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, MARLENE
224 COUNTRY CLUB DR
LAKE PLACID FL 33852**

Name

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

City

FL

Zip Code

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
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD ☒ Delete
NAME CHASE, RICHARD
STREET ADDRESS 109 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE P D ☒ Change ☐ Addition
NAME WILLEM SWIER
STREET ADDRESS 213 COUNTRY CLUB DR.
CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE D ☒ Delete
NAME STOLLER, DORIS
STREET ADDRESS 105 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE V P D ☒ Change ☐ Addition
NAME DON CROWDER
STREET ADDRESS 228 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE SD ☒ Delete
NAME KLINGAMAN, LINDA
STREET ADDRESS 225 COUNTRY CLUB DRIVE
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE ~~SD~~ ☒ Change ☐ Addition
NAME SHIRLEY SMITH
STREET ADDRESS 200 COUNTRY CLUB DR.
CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE TD ☐ Delete
NAME SMITH, MARLENE
STREET ADDRESS 224 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE T D ☐ Change ☐ Addition
NAME MARLENE SMITH
STREET ADDRESS 224 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE P ☒ Delete
NAME HANSEN, KATHY
STREET ADDRESS 244 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE D ☒ Change ☐ Addition
NAME KATIE MCCRARY
STREET ADDRESS 209 COUNTRY CLUB DR
CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Marlene Smith, Treas.

2/16/06 863/465-1970