

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # N98000000593**

1. Entity Name  
**WATERSIDE DOCK ASSOCIATION, INC.**



Principal Place of Business  
**6704 LONE OAK BOULEVARD  
NAPLES, FL 34109**

Mailing Address  
**6704 LONE OAK BLVD  
NAPLES, FL 34109**



03032008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0842426**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**STERLING, JACK  
6704 LONE OAK BLVD  
NAPLES, FL 34109**

**DO NOT WRITE  
IN THIS SPACE**

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 restate)

DATE

**Filing Fee Is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STERLING, JACK 6704 LONE OAK BOULEVARD NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAZDA, RON 4198 BAY BEACH CANE #1H3 FT MYERS BEACH, FL 33931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLAUSSEN, CHRISTOPHER G 6704 LONE OAK BOULEVARD NAPLES, FL 34109
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03/21/08-80034-004 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]* **JACK STERLING** 3/3/08 239 596 9067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #