

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000009406

1. Entity Name
DOCKSIDE INVESTMENTS, INC.



Principal Place of Business
1872 WENTWORTH LN
GREEN COVE SPRINGS, FL 32043

Mailing Address
PO BOX 1825
GREEN COVE SPRINGS, FL 32043

66432601



2. Principal Place of Business

3712 Glyn Cottage Ct.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1825

Suite, Apt. #, etc.

08242004

Chg-P

CR2E034 (10/03)

City & State
Green Cove Springs, FL

Zip

32043

Country

USA

City & State
Green Cove Springs, FL

Zip

32043

Country

USA

4. FEI Number

03-0397628

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JAMES, DOLF
1872 WENTWORTH LN
GREEN COVE SPRINGS, FL 32043

7. Name and Address of New Registered Agent

Name

James, Dolf

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

3712 Glyn Cottage Ct.

City

Green Cove Springs

FL

Zip Code

32043

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

DOLF JAMES PRES.

3/16/04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME JAMES, DOLF
STREET ADDRESS PO BOX 1825
CITY-ST-ZIP GREEN COVE SPRINGS, FL 32043 ☐ Delete

TITLE VS
NAME ARNOLD, ROSALIND
STREET ADDRESS PO BOX 1825
CITY-ST-ZIP GREEN COVE SPRINGS, FL 32043 ☐ Delete

TITLE T
NAME JAMES, ANNA
STREET ADDRESS PO BOX 1825
CITY-ST-ZIP GREEN COVE SPRINGS, FL 32043 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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 exemption stated in Section 119.07(3)(j), 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 607, 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

3/16/04

Date

904-284-2595

Daytime Phone #

Dr. # 002000005406
66432601
Dockside Investments, Inc.
P.O. Box 1825
Green Cove

24 August 2004

The following is a correct copy of the Annual report.
One was sent to you on March 16, 2004 with a check for \$150.
It was not correctly signed and returned to Dockside.
A second letter was sent, but not received, so a notice of intent to dissolve was sent.
Attached is a copy of the front and back of the check # 2025.

Thank you,



Dolf James

66432601

Serial#	Post Date	Amount (\$)
2025	03/24/2004	150.00

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT. # 1009068796

MAR 18 2004

THE UNIVERSITY OF CHICAGO

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03/23/84
0630-0074 ESW 94 P21
BANK OF AMERICA, N.A.

10/23/84

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