

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113885

Entity Name: DOCKSIDE CATERING INC

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

4001 NEWBERRY RD SUITE D-4
GAINESVILLE, FL 32607 US

New Principal Place of Business:

4001 NEWBERRY RD SUITE B3-3
GAINESVILLE, FL 32607 US

Current Mailing Address:

4001 NEWBERRY RD SUITE D-4
GAINESVILLE, FL 32607 US

New Mailing Address:

4001 NEWBERRY RD SUITE B3-3
GAINESVILLE, FL 32607 US

FEI Number: 20-3360883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, JERRY
4001 NEWBERRY RD SUITE D-4
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

ROBERTS, JERRY
4001 NEWBERRY RD SUITE B3-3
GAINESVILLE, FL 32607 US

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.

SIGNATURE:

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBERTS, JERRY
Address: 4001 NEWBERRY RD SUITE D-4
City-St-Zip: GAINESVILLE, FL 32607 US

Title: S () Delete
Name: COHEN, ANDY
Address: 4001 NEWBERRY RD SUITE D-4
City-St-Zip: GAINESVILLE, FL 32607 US

Title: VP () Delete
Name: THEOHARIS, JIM
Address: 4001 NEWBERRY RD SUITE D-4
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROBERTS, JERRY
Address: 4001 NEWBERRY RD SUITE B3-3
City-St-Zip: GAINESVILLE, FL 32607 US

Title: S (X) Change () Addition
Name: COHEN, ANDY
Address: 4001 NEWBERRY RD SUITE B3-3
City-St-Zip: GAINESVILLE, FL 32607 US

Title: VP (X) Change () Addition
Name: THEOHARIS, JIM
Address: 4001 NEWBERRY RD SUITE B3-3
City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY ROBERTS

P

04/21/2008

Electronic Signature of Signing Officer or Director

Date