

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000049722

Entity Name: DOCTOR DOCKSIDE INC

FILED
Mar 27, 2012
Secretary of State

Current Principal Place of Business:

143 VIA CAPRI
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

143 VIA CAPRI
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-3407838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGLE, ANNA L
143 VIA CAPRI
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: HAGLE, ANNA L
Address: 143 VIA CAPRI
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

I hereby 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 all other like empowered.

SIGNATURE: ANNA L. HAGLE

PRES

03/27/2012

Electronic Signature of Signing Officer or Director

Date