

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000073244

FILED  
Mar 24, 2003  
Secretary of State

Entity Name: DOCTOR DOCKSIDE, INC.

## Current Principal Place of Business:

5510-A S RIDGEWOOD AVE  
PORT ORANGE, FL 32127

## New Principal Place of Business:

## Current Mailing Address:

5510-A S RIDGEWOOD AVE  
PORT ORANGE, FL 32127

## 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  
210 GREEN LAKE CIR  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

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

03/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HAGLE, ANNA L  
Address: 210 GREEN LAKE CIR.  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP ( ) Delete  
Name: KENNEDY, BRAD  
Address: 143 VIA CAPRI  
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANNA L. HAGLE

PRES

03/24/2003

Electronic Signature of Signing Officer or Director

Date