

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90101 007 ****61.25

DOCUMENT # 714677

1. Entity Name

LAKESIDE POINT APARTMENT NO. 8 ASSOCIATION, INC.

Principal Place of Business

2304 LAKE OSBORNE DRIVE
 LAKE WORTH FL 33461

Mailing Address

2304 LAKE OSBORNE DRIVE
 LAKE WORTH FL 33461

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Apt. # 5

City & State

City & State

4. FEI Number

59-2381378

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

EGNER, CAMEY
2304 LAKE OSBORNE DR
APT 5
LAKE WORTH FL 33461

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **D**
WATLING DOROTHY
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE Change Addition
 NAME *T/D*
Watling, Dorothy
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **P**
EGNER, CAMEY
 STREET ADDRESS **2304 LAKE OSBORNE DRIVE**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DV**
GRAY, ROY
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D**
METZLER, JAMES
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D**
GRAY, DIANE
 STREET ADDRESS **2304 LAKE OSBORNE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33461**

TITLE Change Addition
 NAME *S/D*
Gray, Diane
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME **D**
George Roth
 STREET ADDRESS **2304 Lake Osborne Dr.**
 CITY-ST-ZIP **lake Worth, FL 33461**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: _____

Dorothy Watling (Dorothy Watling)

Date

Daytime Phone #

1/26/01 (561) 588-9684

CR2E037 (10/00)